2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000057096

1. Entity Name BANGCO, INC.



FILED
Jan 29, 2007 08:00 AM
Secretary of State

Principal Place of Business

9768 BAY VISTA ESTATE BLVD. ORLANDO, FL 32836 Mailing Address

9768 BAY VISTA ESTATE BLVD. ORLANDO, FL 32836



01252007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3411734 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAIDER, SYED I 9768 BAY VISTA ESTATE BLVD ORLANDO, FL 32836

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				IN I MIS	S SPACE
8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or registered a	gent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title i	f applicable. (NOTE, Registered	d Agent signature required when	reinstaling)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	scing \$5.00		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT P HAIDER, SYED I 9768 BAY VISTA ESTATE BLVD ORLANDO, FL 32836	TORS	U00000608136 01/31/07-80065-013 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALI, SHEIKH M 4710 S ORANGE AVENUE ORLANDO, FL 32806				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THAKUR, MURAD K DR 5480 CURRY FORD ROAD ORLANDO, FL 32812	DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHOWDHRKY, MOHAMMED A. 8609 SOUTH BAY DR. ORLANDO, FL. 32819		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					••
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplier of his report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

STYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR