PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT	#	P97000104840
1 Corporation Name		1 07 000 10-10-10

BANISA CORPORATION

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Principal Place of Business Mailing Address	 	
130 SUNRISE AVE 130 SUNRISE AVE UNIT R-312		
UNIT R-312 UNIT R-312 PALM BEACH FL 33480 PALM BEACH FL 33480		DO NOT WRITE IN THIS SPACE
THE DENOTTE SOURCE		3. Date Incorporated or Qualifed
·		12/12/1997
2. Principal Place of Business 2a. Mailing Address		4. FEI Number Applied For
21 26		06-1042434 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		_ \$8.75 Additional
22		5. Certificate of Status Desired Fee Required
City & State		6. Election Campaign Financing S5.00 May Be
23		Trust Fund Contribution Added to Fees
Zip Country Zip	Country	8. This corporation owes the current year Intangible
24 25 29	30	Personal Property Tax. Yes No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
	81 Name	
INTRASTATE REGISTERED AGENT CORORATION	00 04	Topic (D.O. Roy Number in Not Assentable)
701 BRICKELL AVE	82 Street Add	ress (P.O. Box Number is Not Acceptable)
S 3000	83	· 在我们是"自然"的是一个时间,我们是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
MIAMI FL 33131		自接。於蔣伊斯在自由,與都德國的國際,與
	84 City	85 Zip Code 2013 and Code 2013
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statut	es the above-named corr	poration submits this statement for the purpose of changing its registered
- 31 office or registered agent or both in the State of Florida, Such change was a	iurnonzea av ine comorau	ion's board of directors. I hereby accept the appointment as registered
CAL Agent. Ham familiar with, and accept the obligations of, Section 607.0505, Flo	rida Statutes.	
SIGNATURE		·
SIGNATURE	. Desistered Accest clanature require	ad when rejustation) 11414 DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE	: Registered Agent signature require	the state of the s
Signature, typed or printed name of registered agent and title if applicable. (NOTE 12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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12. OFFICERS AND DIRECTORS TITLE P DALER, JOSEF A	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. OFFICERS AND DIRECTORS TITLE PAME BAUER, JOSEF A STREET ADDRESS 130 SUNRISE AVE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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12. OFFICERS AND DIRECTORS TITLE PAME BAUER, JOSEF A STREET ADDRESS CITY-ST-ZIP PALM BEACH FL 33480 TITLE S DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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12. OFFICERS AND DIRECTORS TITLE PALM BEACH FL 33480 TITLE S ELLIS, SHELTON J STREET ADDRESS 120 YACHT CLUB WAY	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachard-int-with an address, with all other like empowered.

SIGNATURE

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/99

201-850-1312

Daytime Phone

CR2E034 (11/98)