


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90109 012 ***150.00

DOCUMENT # P97000104840	
1. Entity Name BANISA CORPORATION	

Principal Place of Business 100 SUNRISE AVE UNIT 211 PALM BEACH, FL 33480	Mailing Address 100 SUNRISE AVE UNIT 211 PALM BEACH, FL 33480
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2. Principal Place of Business 130 Sunrise Avenue	3. Mailing Address 130 Sunrise Avenue
Suite, Apt. #, etc. 312	Suite, Apt. #, etc. 312
City & State Palm Beach, FL	City & State Palm Beach, FL
Zip 33480	Country USA



01132005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent BAUER, JOSEF A 100 SUNRISE AVE., #211 PALM BEACH, FL 33480		7. Name and Address of New Registered Agent Name Josef A. Bauer Street Address (P.O. Box Number is Not Acceptable) 130 Sunrise Avenue, #312 City Palm Beach FL Zip Code 33480	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Josef A. Bauer, President DATE 1/13/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BAUER, JOSEA A		NAME Bauer, Josef A.	
STREET ADDRESS 100 SUNRISE AVE		STREET ADDRESS 130 Sunrise Ave.	
CITY-ST-ZIP PALM BEACH, FL 33480		CITY-ST-ZIP Palm Beach, FL 33480	
TITLE S	<input type="checkbox"/> Delete	TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ELLIS, SHELTON J		NAME Ellis, Shelton J.	
STREET ADDRESS 120 YACHT CLUB WAY		STREET ADDRESS 119 Ocean Cay Way	
CITY-ST-ZIP HYPLUXO, FL 33462		CITY-ST-ZIP Hypluxo, FL 33462	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Josef A. Bauer DATE 1/13/05 DAYTIME PHONE # 561-317-1998
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR