

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000010796

1. Corporation Name
BANANA NANA, INC.

Principal Place of Business
370 MEHLENBACHER ROAD
BELLEAIR FL 33756

Mailing Address
370 MEHLENBACHER ROAD
BELLEAIR FL 33756

2. Principal Place of Business
21 490 MANDALAY AVE

2a. Mailing Address
26 1630 GOLF VIEW RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 UNIT 5

27

City & State

23 CLEARWATER BEACH, FL

28 BELLEAIR, FL

Zip

24 33767 25 USA

29 Zip

30 USA

9. Name and Address of Current Registered Agent

LOVELACE, WILLIAM K
2310 WEST BAY DRIVE
LARGO, FL

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	JOHNSON, WILLIAM H	1.2 NAME	JOHNSON, WILLIAM H
STREET ADDRESS	370 MEHLENBACHER ROAD	1.3 STREET ADDRESS	1630 GOLF VIEW RD
CITY-ST-ZIP	BELLEAIR FL 33756	1.4 CITY-ST-ZIP	BELLEAIR, FL 33756
TITLE	D	2.1 TITLE	P
NAME	JOHNSON, SEAN R	2.2 NAME	JOHNSON, SEAN R
STREET ADDRESS	370 MEHLENBACHER ROAD	2.3 STREET ADDRESS	1630 GOLF VIEW RD
CITY-ST-ZIP	BELLEAIR FL 33756	2.4 CITY-ST-ZIP	BELLEAIR, FL 33756
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-99

727-447-5979

Date

Daytime Phone #

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90118 004 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1998

4. FEI Number
59-3500528

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
\$5.00 May Be
Trust Fund Contribution
Added to Fees

8. This corporation owes the current year Intangible/
Personal Property Tax. Yes No

10. Name and Address of New Registered Agent

CR2E034 (11/98)