## ,2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 09, 2005 8:00 am Secretary of State

ANNUAL REPORT				Secretary of State			
DOCUMENT # P98000046939  1. Entity Name BANAT INVESTMENT CORPORATION				06-09-2005 90002 033 ***158.75			
				<b>'</b>			
Principal Plac	e of Business	Mailing Address		<b>-</b> ⁻	-		
2005 OCEAN WALK TERR PO BOX 290537 #302 DAVIE, FL 33329					Part William		
POMPANO BEACH, FL 33062						# FEM EIER ENUE #118 #118	3 (16)
Principal Place of Business     3. Malling Address							
Suite, Apt. #, etc. 2560 N.E. DixIE Hay. Suite, Apt. #, etc.				05162005	Chg-P	CR2E034 (10/03	
City & State  SENSEN BEACH , FI City & State				4. FEI Number 65-0835		i—+	Applied For Not Applicable
34957	-5823 Country	Zip	Country	5. Certificate of	of Status Desired	\$8.75 A Fee Requi	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent							
STANCIU, ANA				STAN U'V	~~~	WEL	
2049 S. OCEAN DR. #609 EAST HALLANDALE, FL 33009			Street Address	(P.O. Box Numbe	r is Not Acceptable	\$T	
				- 0 -			
			City FMB4	<u></u>	·	FL 33	<u> 028-767</u>
8. The above named eptify 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  Signal supped or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be							
	ue by September 7, 2005	Trust Fund Contrib	ution. 🗀 Ad	Ided to Fees			
10.	OFFICERS AND D	·····	11.	ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTO	<del></del>
TITLE NAME	STANCIU, ANA	☐ Delete	TITLE NAME			Change	e
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE NAME	VPD STANCIU, JONEL	☐ Delete	TITLE NAMÉ			Change	Addition
STREET ADDRESS	13761 NE 23 ST		STREET ADDRESS				
CITY-\$T-ZIP	PEMBROKE PINES, FL 33028		CITY-ST-ZIP				
TITLE NAME	SD STANCIU, VASA	☐ Delete	TITLE			☐ Change	Addition
STREET ADDRESS			■ NAME				
	2005 OCEAN WALK TERR #315		NAME Street Address				
-City-St-Zip		<u> </u>					<u> </u>
-CITY-ST-ZIP	2005 OCEAN WALK TERR #315	Delete	STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
-City-St-Zip	2005 OCEAN WALK TERR #315	☐ Delete	STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
-City-st-zip Title Name	2005 OCEAN WALK TERR #315	·	STREET ADDRESS CITY-ST-ZIP			☐ Change	 e
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	2005 OCEAN WALK TERR #315	☐ Delete	STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE			☐ Change	
- CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	2005 OCEAN WALK TERR #315		STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP				
CHY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	2005 OCEAN WALK TERR #315	☐ Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME				
CHY-ST-ZIP- TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE THE	2005 OCEAN WALK TERR #315		STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE				e 🔲 Addition
CHY-ST-ZIP- TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME	2005 OCEAN WALK TERR #315	☐ Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME	-		☐ Change	e 🔲 Addition
CHY-ST-ZIP- TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE THE	2005 OCEAN WALK TERR #315	☐ Delete	STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE	-		☐ Change	e 🔲 Addition

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:

BRATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

2/6/05

Daytime Phone #