

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G26878

FILED
Jan 28, 2009
Secretary of State

Entity Name: BISCAYNE BUILDING, INC.

Current Principal Place of Business:

STE. 310 BISCAYNE BLDG.
19 W FLAGLER ST
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

STE. 310 BISCAYNE BLDG.
19 W FLAGLER ST
MIAMI, FL 33130

New Mailing Address:

FEI Number: 59-2260173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIORINI, DANTE
STE. 310 BISCAYNE BLDG.
19 W FLAGLER ST
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FIORINI, DANTE M
Address: 3506 BAYSHORE VILLAS DR
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: LITHGOW, DAVID A
Address: 1451 S. MIAMI AVENUE #2707
City-St-Zip: MIAMI, FL 33130

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: FIORINI, PIERRE M
Address: 5 STONY RIDGE ROAD
City-St-Zip: CUMBERLAND FORESIDE, ME 04110

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANTE M. FIORINI

DP

01/28/2009

Electronic Signature of Signing Officer or Director

_____ Date