

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90014 025 *****55.00

DOCUMENT # L00000001278

1. Entity Name
BISCAYNE ISLAND CHARTER, L.L.C.

Principal Place of Business Mailing Address
772 RIDGEWOOD ROAD 772 RIDGEWOOD ROAD
KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0993313** Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ST. LOUIS, ROBERT R JR
THE COLONNADE, SUITE 710
2333 PONCE DE LEON BOULEVARD
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name **MARTINEZ, Juan C.**
 Street Address (P.O. Box Number is Not Acceptable) **2333 Ponce De Leon Blvd**
Suite 710
 City **CORAL GABLES** FL Zip Code **33134**

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.

SIGNATURE DATE **2/20/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	NAME <input type="checkbox"/> Delete	TITLE	NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition
MGRM	DEVANEY, D. J 772 RIDGEWOOD ROAD KEY BISCAYNE FL 33149		
MGRM	DEVANEY, DOROTHY 772 RIDGEWOOD ROAD KEY BISCAYNE FL 33149		

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DATE **2/20/02** 305-365-0527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #

CR2E083 (9/01)