2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P92000011465

1. Entity Name BISCAY CONSTRUCTION CO.



FILED Mar 22, 2007 08:00 A Secretary of State

Principal Place of Business

7225 NW 25TH STREET

SUITE 110 MIAMI, FL 33122 Mailing Address

7225 NW 25TH STREET Suite 110

MIAMI, FL 33122



DO NOT WRITE IN THIS SPACE

03192007

4. FEI Number Applied For 65-0381597 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

GRONDIN, G E 7225 NW 25TH STREET SUITE 110 MIAMI, FL 33122

STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

No Chg-P

	named entity submits this statement for the pions of registered agent.	urpose of changing its registered o	ffice or r	egistered agent, or both	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered Age	nt signature	e required when reinstating)	DATE
	E NOWIII FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	, 	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRONDIN, G E 7225 NW 25TH ST, SUITE 110 MIAMI, FL 33122				uacaaac77041
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRONDIN, MARY S 7225 NW 25TH ST, SUITE 110 MIAMI, FL 33122				U000000676041 03/30/07-80042-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRONDIN, CRAIG W 7225 NW 25TH ST, SUITE 110 MIAMI, FL 33122			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					_
TITLE				•	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 air other like empowered.

SIGNATURE: SIGNATURE AND TYPES OF MUNTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>3-19-07</u>

305-592-7090