

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 006518

FILED
Jan 25, 2007
Secretary of State

Entity Name: BISCAYNE ENGINEERING COMPANY, INC.

Current Principal Place of Business:

529 WEST FLAGLER STREET
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 011164
MIAMI, FL 33101 US

New Mailing Address:

FEI Number: 59-0165220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOLTON, GEORGE C
12901 83RD LANE NORTH
WEST PALM BEACH, FL 33412 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: VD () Delete
Name: FERRER, BEATRIZ
Address: 20400 S.W. 49 COURT
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: PD () Delete
Name: BOLTON, GEORGE C
Address: 12901 83RD LANE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

Title: TSD () Delete
Name: BOLTON, MARY E
Address: 12901 83RD LANE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: CALABRESE, MELISSA
Address: 12858 80TH LANE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BEATRIZ FERRER

VP

01/25/2007

Electronic Signature of Signing Officer or Director

_____ Date