2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 006518

Title:

Name:

Address:

City-St-Zip:

FILED May 01, 2009 Secretary of State

Entity Name: BISCAYNE ENGINEERING COMPANY, INC.						
Current Principal Place of Business:			I	New Principal Place of Business:		
529 WEST FLAGLER STREET MIAMI, FL 33130						
Current Mailing Address:				New Mailing Address:		
529 WEST FLAGLER STREET MIAMI, FL 33130 US						
FEI Number:	59-0165220	FEI Number Applied For ()	FEI Numi	ber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BOLTON, GEORGE C 12901 83RD LANE NORTH WEST PALM BEACH, FL 33412 US				COHN, ALAN B GREENSPOON MARDER PA 100 W. CYPRESS RD STE 700 FORT LAUDERDALE, FL 33309 US		
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: ALAN COHN, ESQ.				05/01/2009		
Electronic Signature of Registered Agent					Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	FERRER, BEAT 20400 S.W. 49		1	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	BOLTON, GEOR 12901 83RD LA		1	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	BOLTON, MARY 12901 83RD LA		1	Title: () Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	CALABRESE, M 12858 80TH LAN		1	Title: () Name: Address: City-St-Zip:) Change ()Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GEORGE BOLTON PRES 05/01/2009

() Delete

CONNER, ANDREW D

4450 NW 109 COURT

DORAL, FL 33178

() Change () Addition