SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F96000001929 (6) DOCUMENT

BISCAYNE SILVER, INC.

FILED Sep 09 1997 8:00am Secretary of State



					II (
Principal Place of Business Mailing Address				. LEAULAN HAN TAINE BINT BONN BONN BONN BRITT BALLA BOLD VIRTUR 11818 (BNI) PÁBL		
% RICHARD K. BERNSTEIN ASSOCIATES 551 MADISON AVE. NEW YORK NY 10022		% RICHARD K. BERNSTEIN ASSOCIATES 551 MADISON AVE. NEW YORK NY 10022		DO NOT WRITE	IN THIS SDACE	
				3. Date Incorporated or Qualified	3a. Date of Last Report	
····				04/18/1996		
	ace of Business	2a. Mailing Address	A C	4. FEI Number	Applied For	
	COLLINS AVE	· · · · · · · · · · · · · · · · · · ·	AVENUE SOUTH	52-1972294	Not Applicable	
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	41.4	6. Election Campaign Financing	\$5.00 May Be	
	HARBOUR FL	28 NEW YORK		Trust Fund Contribution	Added to Fees	
Zip 24 331	54 Country	Zip 10016 3	Country USA	8. This corporation owes or has pai		
24 751	9. Name and Address of Current	1	10	Personal Property Tax due June : 10. Name and Address of New Reg		
ND.	······································	Hogistolen Agont	81 Name	TO. Hame and Address of New Het	Asialed Agent	
THE OCTATION INC.						
528 E. PARK AVE.			82 Street Addres	82 Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301			100			
			63			
			84 City		FL 85 Zip Code	
office or re		f Florida. Such change was au	thorized by the corporatio	ration submits this statement for the pi n's board of directors. I hereby accep		
SIGNATURE						
	Signature, lyped or printed name of registered agent OFFICERS AND		Registered Agent signature required		DATE EDS AND DIDECTORS IN 40	
12.	C OFFICENS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition	
NAME	BORLETTI, MAURIZIO	_ been			Attained	
1	373 PARK AVE. SOUTH		1.2 NAME			
STREET ADDRESS	NEW YORK NY		1.3 STREET ADDRESS			
CITY-ST-ZIP	CP	DELETE	1.4 CITY - ST - ZIP		Change C Addition	
TITLE	IRAZABAL Y AZQUETA , XAVI		2.1 TITLE		Change Addition	
NAME	363 PARK AVE. SOUTH	IN DE	2.2 NAME			
STREET ADDRESS	NEW YORK NY		2.3 STREET ADDRESS			
CITY-ST-ZIP	-	T briess	2 4 CITY-ST-ZIP			
TITLE	DV CHAINIL THEODY	☐ DELETE	31 TITLE		Change Acidition	
NAME	CHAUNU, THIERRY		3.2 NAME			
STREET ADDRESS	373 PARK AVE. SOUTH		3.3 STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY		3.4. CITY-ST-ZIP			
TITLE	S STONE STONE OF STON	☐ DELETE	4.1 TITLE		L Change Addition	
NAME	BERNSTEIN, RICHARD K		4. 2 NAME			
STREET ADDRESS	551 MADISON AVE.		4.3 STREET ADDRESS		i	
CITY-ST-ZIP	NEW YORK NY 10022		4.4 CITY - ST - ZIP			
TITLE	1	☐ DELETE	5.1 TITLE		Change Addition	
NAME	MCGOWAN, DAVID		5.2 NAME			
STREET ADDRESS	373 PARK AVE. SOUTH		5.3 STREET ADDRESS		į	
CITY-ST-ZIP	NEW YORK NY		5.4 CITY - \$1 - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS		į	
0072 07 700			CARLES OF THE		1	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: