FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

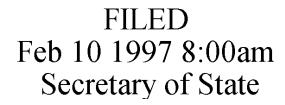
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K37729

(6)

BISCAYNE AERONAUTICS, INC.

Principal	Place	οf	Business :	





Principal Place	e of Business	Mailing Address								
1000 NW 54TH STREET MIAMI FL 33127		1000 NW 54TH STREET MIAM? FL 33127-1820								
						3. Date Incorporated or Qualified 10/10/1988	ι	ate of Last 12/1996	Report	7
	lace of Business	2a. Mailing Address	.,,			4. FÉI Number			Applied For	
21		26				65-0090825			Not Applicable	3_
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required	
City & State	9	City & State				6. Election Campaign Financing		\$5.0	May Be	1
23		28				Trust Fund Contribution	<u> </u>		d to Fees	_
Ζιρ	Country	Zip		untry	•	8. This corporation has liability for in			s. 199.032,	ı
24	25 9. Name and Address of Current	29 Pagistared Apont	30	т		10. Name and Address of New Rec	Yes			
1140	· · · · · · · · · · · · · · · · · · ·	nagistereo Again		81	Name	10. Name and Address of New Act	istereu	Agent		-
	RISON, JOHN C., JR.			(Hamo					
	N.W. 54TH ST.			82	Street Add	dress (P.O. Box Number is Not Acceptable	e)			7
. MINI	AI FL 33127			83						\dashv
				84	City	•	FL	85 Zij	Code .	
11. Pursuant office or r agent, I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obliga	and 607.1508, Florida Statu of Florida. Such change was lions of, Section 607.0505, Fl	ites, the a authorize lorida Sta	above ed by itutes	c-named co the corpora	rporation submits this statement for the pration's board of directors. It horeby accep	rpase o	f changing pointment a	its registered as registered	
SIGNATURE	Signature, typed or printed name of registered age:	Land title discrete able (NO)	71 December	nd Ann		uired when reinstatz (f)	DATE			
12.	OFFICERS AND		13.	···	- Signatore requ	ADDITIONS/CHANGES TO OFFIC		DIRECTO	DRS IN 12	⊣ է
TITLE	SD	DELETE	1.11					Change		<u>ا</u> ا
NAME	HARRISON, JOHN C., JR.	•	1.2 N	IAME						
STREET ADDRESS	3870 LEAFY WAY		1.3 9	STREET	ADDRESS .			•		1
CITY-ST-ZIP	COCONUT GROVE FL		1.4 0	OTY-S	1 · Z IP					į
TITLE	PD	DELETE	2.1 T					Change	Addition	, č
NAME	JOHNSON, ERIC S II		2.2 N	AME		'				
STREET ADDRESS	15278 SW 104 ST NO 5-36		2.3 9	STREET	ADDRESS					
CITY-ST-ZIP	MIAMI FL		2 4	C(1) Y - 5	S1-ZIP					ĺ
TITLE	D	☐ DELETE	3.1 T	ITEE				☐ Change	Addition	٦,
NAME	KENDALL, HAROLD E., JR.		321	IAME						
STREET ADDRESS	3560 W. GLENCOE ST.		335	STREET	ADDRESS					ļ
CITY-ST-ZIP	MIAMI FL		3 4.	CITY - 9	S1 - ZIP			-		1
TITLE		☐ DELETE	4.1 T	TLE				Change	Addition	1
NAME			4.2	NAVIE						
STREET ADDRESS			4.3 9	STREET	ADDRESS					
CITY-ST-ZIP				:I1Y - \$	1-ZIP			T 2	1 4 (10)	4
TITLE		DELETE	5.1 T		1			Change	Addition	'
NAME			5.2 N							
STREET ADDRESS					ACORESS					
CITY-ST-ZIP		to the		114-8	7 - 7IP			0	1.120	4
TITLE		DELETE	611					Change	Addition	1
NAME				IAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			6.4 0	HIY-S	1-20P					- [

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 each 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 chapted, or on an attachment with an address.

John C. Harrison, Jr. 1-31-97

(305) 757-0621