2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K37729 1. Entity Name **BISCAYNE AERONAUTICS, INC.** Principal Place of Business Mailing Address 8365 S.W. 112 STREET 8365 S.W. 112 STREET MIAMI, FL 33156 MIAMI, FL 33156

FILED Apr 27, 2007 08:00 A Secretary of State



04242007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0090825 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAMPONE, KENNETH A DO NOT WRITE 8365 S.W. 112 STREET MIAMI, FL 33156 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Begistered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE RAMPONE, KENNETH A NAME U00000737395 05/11/07-80026-009 150.00 STREET ADDRESS 8365 S.W. 112 STREET CITY-ST-ZIP MIAMI, FL 33156 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 all other like empowered.

ENNETD RAMPONE

NAME STREET ADDRESS CITY-ST-ZIP

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