

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05593

FILED
Apr 30, 2004
Secretary of State**Entity Name:** BISCAYNE BAY POWER SQUADRON, INC.**Current Principal Place of Business:**290-174TH STREET
APT #1215
SUNNY ISLES, FL 33160 US**New Principal Place of Business:****Current Mailing Address:**290-174TH ST
APT #1215
SUNNY ISLES, FL 33160**New Mailing Address:****FEI Number:** 59-6147746 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KATZ, BONNIE
290-174TH STREET
APT #1215
SUNNY ISLES, FL 33160 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**OFFICERS AND DIRECTORS:****Title:** CDR () Delete
Name: GEDULD, LUZ
Address: 17011 N. BAY RD #807
City-St-Zip: SUNNY ISLES, FL 33160 US**Title:** DE () Delete
Name: SHULTZ, HARRY LT/C
Address: 3944 NE 167TH STREET
City-St-Zip: NO MIAMI BEACH, FL 33160**Title:** SED () Delete
Name: KATZ, BONNIE LT/C
Address: 290-174TH STREET
City-St-Zip: SUNNY ISLES, FL 33160 US**Title:** TD () Delete
Name: LEON, BARBARA LTC
Address: 9470 OAK GROVE CIRCLE
City-St-Zip: DAVIE, FL 33328**Title:** SD () Delete
Name: FRISCHMAN, JAY LTC
Address: 15322 SUNSET DR #112
City-St-Zip: MIAMI, FL 33193**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CDR (X) Change () Addition
Name: KATZ, BONNIE
Address: 290 - 174 STREET #1215
City-St-Zip: SUNNY ISLES, FL 33160 US**Title:** () Change () Addition
Name: () Change () Addition
Address: () Change () Addition
City-St-Zip: () Change () Addition**Title:** SED (X) Change () Addition
Name: FRISCHMAN, JAY LT/C
Address: 15322 SW 72 STREET #12
City-St-Zip: MIAMI, FL 33193 US**Title:** TD (X) Change () Addition
Name: LEON, BARBARA LTC
Address: 9821 SUNRISE LAKES BLVD #112
City-St-Zip: SUNRISE, FL 33322**Title:** SD (X) Change () Addition
Name: GEDULD, LUZ LTC
Address: 17011 N BAY ROAD
City-St-Zip: SUNNY ISLES, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE KATZ

CDR

04/30/2004

Electronic Signature of Signing Officer or Director_____
Date