## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000104896

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

2705 HILOA STREET

SOFGE, FLORA M

14708 STIRRUP LANE

WELLINGTON, FL 33414

COCONUT GROVE, FL 33133

( ) Delete

Entity Name: BISCAYNE LADY CRUISES, INC.

FILED Mar 06, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
555 NE 15TH STREET STE 102 MIAMI, FL 33132				401 BISCAYNE BLVD (BAYSIDE MARINA) MIAMI, FL 33132		
Current Mailing Address:				New Mailing Address:		
555 NE 15 MIAMI, FL	STH STREET S 33132	STE 102				
FEI Number	: 65-1153467	FEI Number Applied For ( )	FEI Numbe	r Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BETZ, GILBERT C 2025 SW 32ND AVE STE #120 MIAMI, FL 33145				SOFGE, CHARLES E 555 NE 15TH ST. STE 102 MIAMI, FL 33132		
	e named entity e of Florida.	submits this statement for the	purpose of ch	nanging its registere	ed office or registered agent, or both,	
SIGNATURE: CHARLES E. SOFGE					03/06/2003	
	Electro	nic Signature of Registered Ag	jent		Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( SOFGE, CHAF 114 W SAN M MIAMI BEACH	ARINO DRIVE	Ad	e: me: dress: y-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D ( SOFGE, HALE	) Delete Y E	Titl Na	e: me:	( ) Change ( ) Addition	

Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES E. SOFGE D 03/06/2003

() Change () Addition