

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000152229

Entity Name: BISCAYA HOTEL, INC.

FILED  
Apr 28, 2008  
Secretary of State

**Current Principal Place of Business:**

1910 ALTON RD  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1910 ALTON RD  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 20-0489182      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HILL, IRA  
1910 ALTON RD.  
MIAMI BEACH, FL 33139      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ZWEIG, YITZCHAK  
Address: 1910 ALTON RD.  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD      ( ) Delete  
Name: TABON, MORIS  
Address: 1910 ALTON RD.  
City-St-Zip: MIAMI BEACH, FL 33139

Title: STD      ( ) Delete  
Name: HILL, IRA  
Address: 1910 ALTON RD.  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: IRA HILL

RA

04/28/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date