PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000029934 1. Corporation Name

BISCAYNE PROPERTIES, INC.

Principal Place of Business

Mailing Address

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90071 030 ***150.00



•	of Eusiness	Walling Madress					
10770 COLUMB	IA PIKE	10770 COLUMBIA PIKE					
SILVER SPRING		SILVER SPRING MD 20901			DO NOT WRITE IN THIS SPACE		
US		US					
					3. Date Incorporated or Qualifed	ĺ	
					04/20/1994		
2. Principal Pl	lace of Business	2a. Mailing Address	,			pplied For	
21		26			52-1873750 N	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5 Contiferate of Status Desired Status Proping	Additional	
22	•	27			Fee R	Required	
City & State	e	City & State			6. Election Campaign Financing 55.00	May Be	
23		28				to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible		
	25 29 30		¬ ´	Personal Property Tax.		■ No	
24	9. Name and Address of Current		1		10. Name and Address of New Registered Agent		
	3. Name and Address of Current	Registered Agent	81	Name			
TUE	PRENTICE-HALL CORPORATION	SYSTEM INC	-	1101110			
		5151EM, 1110.	82	Street Address (P.O. Box Number is Not Acceptable)			
	HAYS ST.		L				
	E 105		83	ļ			
TALL	AHASSEE FL 32301		84	City	85 Zip	Code	
	A CONTRACTOR OF THE STATE OF TH		64	City	FL S E S		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes,	the above	e-named	corporation submits this statement for the purpose of changing it	ts registered	
l office or re	egistered agent, or both, in the State o	i Flonda. Such change was auth	iorized by	tne corpo	pration's board of directors. I hereby accept the appointment as r	registered	
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Florida	a Statutes	•			
SIGNATURE		(NOTE: De		et elementure r	equired when reinstating) DATE		
12				it alginators /		ORS IN 12	
12.	OFFICERS AND	DIRECTORS	13.	it signators /	ADDITIONS/CHANGES TO OFFICERS AND DIRECT		
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CITY-ST-ZIP 14. I 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SILVER

SIGNATURE:

STREET ADDRESS

Spring

MD 20901