

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 23, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # S95359**

1. Entity Name  
**RUNWAY CORPORATION**



Principal Place of Business  
**7250 NW 11 ST  
MIAMI, FL 33126 US**

Mailing Address  
**7250 NW 11 ST  
MIAMI, FL 33126 US**



**DO NOT WRITE IN THIS SPACE**

03212005 No Chg-P CR2E034 (10/03)

4. FEI Number **65-0306150** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**NOE, WILLIAM  
3681 ESTEPONA  
DURAL, FL 33178**

**DO NOT WRITE  
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 *William J. Noe*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/21/05  
DATE

FILE NOW!!! FEE IS \$150.00.  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE **P**  
NAME **NOE, DENISE V**  
STREET ADDRESS **3681 ESTEPONA AVE.**  
CITY-ST-ZIP **MIAMI, FL 33178**

TITLE **VP**  
NAME **GONZALEZ, RAMON**  
STREET ADDRESS **13860 SE 36TH ST.**  
CITY-ST-ZIP **MIAMI, FL 33187**

TITLE **S**  
NAME **NOE, WILLIAM**  
STREET ADDRESS **3681 ESTEPONA AVE.**  
CITY-ST-ZIP **MIAMI, FL 33178**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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03/23/05-80010-016 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: *William J. Noe* **William J. Noe**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/05 305-262-9500  
Date Daytime Phone #