

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 11:09

DOCUMENT # 728081 (1)

1. Corporation Name

BRICKELL BAY TOWER CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1408 SE BAYSHORE DR.
MIAMI FL 33131

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MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/15/1973
3a. Date of Last Report 02/07/1994

4. FEI Number 59-1521504
Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

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

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUTKOWSKY, ANDREW D
1408 S. BAYSHORE DR.
% MANAGEMENT OFFICE
MIAMI FL 33131

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ZAMORA, NELLY R.
STREET ADDRESS 1408 S. BAYSHORE DRIVE, #1211
CITY-ST-ZIP MIAMI FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS Jorge Casales
1.4 CITY-ST-ZIP 1408 S Bayshore Dr, #1005
MIAMI, FL 33131

TITLE VD
NAME HEWETT, ERNEST J.
STREET ADDRESS 1408 S. BAYSHORE DRIVE, #811
CITY-ST-ZIP MIAMI FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TD
NAME ANAYA, ROBERTO D.
STREET ADDRESS 1408 S. BAYSHORE DRIVE #407
CITY-ST-ZIP MIAMI FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD
NAME MARTINEZ-MALO, YVONNE
STREET ADDRESS 1408 S. BAYSHORE DRIVE #215
CITY-ST-ZIP MIAMI FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME CARBONELL, SEIDA
STREET ADDRESS 1408 S. BAYSHORE DR., #518
CITY-ST-ZIP MIAMI FL 33131

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME KANNER, RICHARD
STREET ADDRESS 1408 S. BAYSHORE DRIVE, #1008
CITY-ST-ZIP MIAMI FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Nelly Zamora

NELLY ZAMORA

1/26/95 (305) 371 9647

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #