2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 18, 2002 8:00 am Secretary of State DOCUMENT # 728081 1. Entity Name 02-18-2002 90157 033 ****61.25 BRICKELL BAY TOWER CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address BRICKELL BAY TOWER BRICKELL BAY TOWER 1408 BRICKELL BAY DRIVE 1408 BRICKELL BAY DRIVE 80027218 **MAIMI FL 33131** MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1521504 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DUTKOWSKY, ANDREW D 1408 BRICKELL BAY DRIVE % MANAGEMENT OFFICE Zip Code **MIAMI FL 33131** LORI 8. The above named the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE 9. Election Campaign Financing \$5.00 May Be Make Check Pavable to FILE NOW: FEE IS \$61,25 Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD (9/04) TITLE TITLE ☐ Addition Delete ☐ Channe zamora. Nelly R. NAME NAME STREET ADDRESS 1408 S. BAYSHORE DRIVE, #1211 STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP VD. ☐ Delete TITLE ☐ Addition ☐ Change KANNER, RICHARD NAME NAME STREET ADDRESS 1408 BRICKELL BAY DRIVE, #1008 STREET ADDRESS CITY-ST-ZIP~ CITY-ST-ZIP MAIMI-FL-33131 TITLE ☐ Delete TITLE Change ☐ Addition HEWETT, ERNEST J NAME NAME STREET ADDRESS 1408 BRICKELL BAY DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33131 TITLE ☐ Delete TITLE ☐ Addition ☐ Change DBRAFMAN, HOWARD NAME NAME STREET ADDRESS 1408 BRICKELL BAY DR STE 411 STREET ADDRESS CITY-ST-7IP MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition SLACK, THEODORE NAME NAME STREET ADDRESS 14808 BRICKELL BAY DRIVE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition CASTELLANOS, MARIA NAME STREET ADDRESS 2110 S W 24TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MAIMI FL 33145** 12. 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 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 617, 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.

FILED