2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400003608

FILED Apr 03, 2006 Secretary of State

Entity Name: BRICKELL VISTA CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business: 800 SW 9TH AVE MIAMI, FL 33130		New Principal Place	New Principal Place of Business: 900 SW 8TH STREET MIAMI, FL 33130	
urrent N	/lailing Address	5:	New Mailing Addres	s:
701 SW IIAMI, FL	3RD AVENUE . 33129		900 SW 8TH STREET MIAMI, FL 33130	Г
El Number	r: 20-2173120	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
EGISTE	DED ACENTS (OF FLORIDA, L.L.C.		
00 SE SE UITE 290	ECOND ST	·		
00 SE SE UITE 290 IIAMI, FL he above	ECOND ST 00 . 331312130 US	3	ourpose of changing its registere	ed office or registered agent, or both,
00 SE SE UITE 290 IIAMI, FL he above	ECOND ST 00 . 331312130 US e named entity si e of Florida. RE:	s ubmits this statement for the բ		ed office or registered agent, or both,
00 SE SE UITE 290 IIAMI, FL he above the Stat	ECOND ST 00 . 331312130 US e named entity si e of Florida. RE:	3		ed office or registered agent, or both, Date
00 SE SE UITE 290 IAMI, FL he above the Stat IGNATU	ECOND ST 00 . 331312130 US e named entity si e of Florida. RE:	submits this statement for the posterior of Registered Age	ent	
00 SE SE UITE 290 IAMI, FL he above the Stat IGNATU	ECOND ST 00 . 331312130 US e named entity si e of Florida. RE: Electroni	c Signature of Registered Age CORS: Delete R A TREET	ent	Date
OO SE SE UITE 290 IIAMI, FL he above the Stat IGNATU FFICER ttle: ame: ddress:	ECOND ST 00 . 331312130 US e named entity si e of Florida. IRE: Electroni S AND DIRECT PD ()I TORRES, PETEI 900 S.W. 8TH S' MIAMI, FL 3313	c Signature of Registered Age CORS: Delete R A TREET O Delete Y TREET	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER TORRES PD 04/03/2006