

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000090442

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: 400 & 1200 BRICKELL INVEST., INC.

## Current Principal Place of Business:

8600 NW 53 TERRACE  
SUITE 101  
MIAMI, FL 33166 US

## New Principal Place of Business:

## Current Mailing Address:

8600 NW 53 TERRACE  
SUITE 101  
MIAMI, FL 33166 US

## New Mailing Address:

FEI Number: 26-1999129      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUESADA, PABLO S  
2333 PONCE DE LEON BLVD.  
302  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HARTMANN, LUIS  
Address: 8600 NW 53 TERRACE, SUITE 101  
City-St-Zip: MIAMI, FL 33166

Title: S ( ) Delete  
Name: RODRIGUEZ, MARITZA  
Address: 8600 NW 53 TERRACE, SUITE 101  
City-St-Zip: MIAMI, FL 33166 US

Title: D ( ) Delete  
Name: MALDONADO, VERONICA  
Address: 8600 NW 53 TERRACE, SUITE 101  
City-St-Zip: MIAMI, FL 33166 US

Title: D ( ) Delete  
Name: MALDONADO, DHARLA  
Address: 8600 NW 53 TERRACE, SUITE 101  
City-St-Zip: MIAMI, FL 33166 US

Title: D ( ) Delete  
Name: DEGWITZ, RICARDO  
Address: 8600 NW 53 TERRACE, SUITE 101  
City-St-Zip: MIAMI, FL 33166 US

Title: D ( ) Delete  
Name: MALDONADO, SAMUEL  
Address: 8600 NW 53 TERRACE, SUITE 101  
City-St-Zip: MIAMI, FL 33166 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARITZA RODRIGUEZ

S

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date