

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90453 014 ***150.00

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1. Entity Name
BRICKELL BAY PLAZA, INC.



Principal Place of Business
ONE BAYFRONT PLAZA, SUITE 1100
100 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131

Mailing Address
ONE BAYFRONT PLAZA, SUITE 1100
100 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131

50015313



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02152006 Chg-P CR2E034 (11/05)

City & State

4. FEI Number
65-0749541

Applied For
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOLLO, TIBOR
ONE BAYFRONT PLAZA, SUITE 1100
100 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

DPS
HOLLO, TIBOR
ONE BAYFRONT PLAZA, SUITE 1100
MIAMI, FL 33131

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VP
HOLLO, WAYNE
100 S. BISCAYNE BLVD.
MIAMI, FL 33131

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VP
BAER, STEVE
100 S. BISCAYNE BLVD.
MIAMI, FL 33131

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VP
HULLS, JEROME
100 S. BISCAYNE BLVD.
MIAMI, FL 33131

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VP
JEROME HOLLO
100 S. BISCAYNE, MIAMI 33131

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

T
KATZ, LEONARD
100 S. BISCAYNE BLVD.
MIAMI, FL 33131

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____