2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000042334

Entity Name: BRICKELL MANAGEMENT SERVICES, INC.

FILED Feb 16, 2007 Secretary of State

LINKY NAME: BRICKELL MANAGEMENT SERVICES, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
520 BRICKELL KEY DRIVE				777 BRICKELL AVENUE			
STE 0-305				STE 1100			
MIAMI, FL 33131				MIAMI, FL 33131 US			
Current Mailing Address:				New Mailing Address:			
520 BRICKELL KEY DRIVE				777 BRICKELL AVENUE			
STE 0-305 MIAMI, FL 33131				STE 1100 MIAMI, FL 33131 US			
			FEI Nun	nber Not Appli		Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:		Name and	Address of	f New Registered Agent:	
						new registered Agent.	
	OBAL CORPC (ELL KEY DRI)	PRATE ADMINISTRATION LLC		CEVALLOS	S, FAUSTO ELL AVENL	IF	
MIAMI, FL		VE 0-303		STE. 1100			
				MIAMI, FL	33131 US		
The above in the State		submits this statement for the pu	irpose o	f changing it	ts registered	d office or registered agent, or both,	
SIGNATUE	DE: FALISTO	CEVALLOS				02/16/2007	
SIGNATURE: FAUSTO CEVALLOS Electronic Signature of Registered Agent						Date	
			IL.			Date	
Election Can	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title:	PD ()	Delete		Title:		() Change () Addition	
Name:	PINHEIRO, NEI			Name:			
Address:	777 BRICKELL			Address:			
City-St-Zip:	MIAMI, FL 331	31		City-St-Zip:			
Title:	VPD ()	Delete		Title:		() Change () Addition	
Name:	PINHEIRO, EDI	JARDO		Name:			
Address:	777 BRICKELL	AVE STE 1100		Address:			
City-St-Zip:	MIAMI, FL 331	31		City-St-Zip:			
Title:	VOD (Delete		Title:		() Change () Addition	
Name:	PAULUCCI, JO			Name:		()age ()aa	
Address:	777 BRICKELL			Address:			
City-St-Zip:	MIAMI, FL 331	31		City-St-Zip:			
Title:	VP (Delete		Title:	VP	(X) Change () Addition	
Name:	CAVALLOS, FA			Name:	CEVALLOS.		
Address:			Address: 777 BRICKELL AVE STE 1100				
City-St-Zip:	MIAMI, FL 331			City-St-Zip:	MIAMI, FL 3		
Title:	VD ()	Delete		Title.	VD	(V) Change () Addition	
Title: Name:	, ,	Delete		Title: Name:		(X) Change () Addition	
Address:	·			Name: Address:	,		

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: MIAMI, FL 33131

SIGNATURE: FAUSTO CEVALLOS VP 02/16/2007

City-St-Zip: MIAMI, FL 33131