

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 750138

1. Corporation Name

BRICKELL BISCAYNE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

150 S E 25TH ROAD
MIAMI FL 33129

Mailing Address

150 S E 25TH ROAD
MIAMI FL 33129

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90185 029 ****61.25



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

12/11/1979

4. FEI Number

59-2068931

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FISHER & DAVIDSON, LLP
C/O SEAN FISHER
1450 MADRUGA AVE, #202
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name David Kobrin, P.A.
82 Street Address (P.O. Box Number is Not Acceptable) 8900 SW 107 Avenue #206
83
84 City Miami FL 85 Zip Code 33176

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

12. OFFICERS AND DIRECTORS

TITLE P
NAME LOPATE, SHAYNA
STREET ADDRESS 150 SE 25 RD #2A
CITY-ST-ZIP MIAMI FL

TITLE VP
NAME STEINHARDT, BRIT
STREET ADDRESS 150 SE 25 RD, #6-F
CITY-ST-ZIP MIAMI FL 33129

TITLE T
NAME GUERRERO, CARMEN
STREET ADDRESS 150 SE 25 RD, #2-1
CITY-ST-ZIP MIAMI FL 33129

TITLE S
NAME BACK, BLANCHE
STREET ADDRESS 150 SE 25 RD, #14-J
CITY-ST-ZIP MIAMI FL 33129

TITLE D
NAME MCDONALD, GRACIA
STREET ADDRESS 150 SE 25 RD, #11-C
CITY-ST-ZIP MIAMI FL 33129

TITLE D
NAME AVERHOFF, CARLOS
STREET ADDRESS 150 SE 25 RD, #10-F
CITY-ST-ZIP MIAMI FL 33129

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE D
4.2 NAME Terreros, Guy
4.3 STREET ADDRESS 150 SE 25 Rd. #15-F
4.4 CITY-ST-ZIP Miami, FL 33129

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

002926

CR2E037 (11/98)