2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045595

Entity Name: 1110 BRICKELL PROPERTIES, LLC

FILED Mar 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2333 BRICKELL AVENUE, NUMBER 1803 1110 BRICKELL AV. SUITE 800

MIAMI, FL 33129 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

2333 BRICKELL AVENUE, NUMBER 1803 1110 BRICKELL AV. SUITE 800

MIAMI, FL 33129 MIAMI, FL 33131

FEI Number: 59-3805264 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. AROCENA, FEDERICO J 1840 SW 22ND ST. 1110 BRICKELL AV SUITE 800 4TH FLOOR MIAMI, FL 33131 US MIAMI, FL 33145 US

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: FEDERICO AROCENA 03/29/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition

AROCENA, FEDERICO AROCENA, FEDERICO Name: Name: 2333 BRICKELL AVENUE, NUMBER 1803 Address: 1110 BRICKELL AV SUITE 800 Address:

City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete Title: (X) Change () Addition ALLESANDRINI, CESARE Name: ALLESANDRINI, CESARE Name:

Address: 2333 BRICKELL AVENUE, NUMBER 1803 Address: 1110 BRICKELL AV SUITE 800 City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33131

Title: () Delete Title: (X) Change () Addition

ALLESANDRINI, CESARE ALLESANDRINI, CESARE Name: Name: 2333 BRICKELL AVENUE, NUMBER 1803 1110 BRICKELL AV SUITE 800 Address: Address:

City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33131

Title: () Delete Title: (X) Change () Addition

Name: AROCENA, FEDERICO Name: AROCENA, FEDERICO 2333 BRICKELL AVENUE, NUMBER 1803 1110 BRICKELL AV SUITE 800

Address: Address:

City-St-Zip: MIAMI, FL 33129 City-St-Zip: MIAMI, FL 33131

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FEDERICO AROCENA 03/29/2006