2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
May 19, 2008 8:00 am
Secretary of State
04-09-2008 90027 031 ****61.25

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1. Entity Name
BRICKELL VIEW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
126 SW 17 RD MIAMI, FL 33129	PO BOX 11022 MIAMI, FL 33101 US

66011007

03242008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
22-3898759
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ABREU, EDSEL
126 SW 17 RD
SUITE 309
MIAMI, FL 33129

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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: Edsel Abreu, Edsel Abreu — DATE: 3/24/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	ZOHRER, JAIME
STREET ADDRESS	PO BOX 11022
CITY-ST-ZIP	MIAMI, FL 33101
TITLE	S
NAME	FEISST, TOBIAS
STREET ADDRESS	PO BOX 11022
CITY-ST-ZIP	MIAMI, FL 33101
TITLE	P
NAME	ABREU, EDSEL
STREET ADDRESS	PO BOX 11022
CITY-ST-ZIP	MIAMI, FL 33101
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 617, 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: Edsel Abreu — 4/29/08 — (305) 281-2517
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #