2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2009
Secretary of State

DOCUMENT# P05000149498

Entity Name: BRICKELL ON THE RIVER 1100 CORP.

Current Principal Place of Business:

11324 NW 47 LANE
DORAL, FL 33178

New Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE
SUITE 906
COCONUT GROVE, FL 33133

Current Mailing Address:

11324 NW 47 LANE
DORAL, FL 33178

New Mailing Address:

2665 SOUTH BAYSHORE DRIVE
SUITE 906
COCONUT GROVE, FL 33133

FEI Number: 20-3759863 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GURIAN, JORGE
11324 NW 47 LANE
DORAL, FL 33178 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SUAREZ, LUZ M
Address: 11324 NW 47 LANE
City-St-Zip: DORAL, FL 33178

Title: SD ( ) Delete
Name: SERNA, PAOLA
Address: 11324 NW 47 LANE
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SUAREZ, LUZ M
Address: 2665 S BAYSHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD (X) Change ( ) Addition
Name: SERNA, PAOLA
Address: 2665 SOUTH BAYSHORE DRIVE STE 906
City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: LUZ M SUAREZ PD 05/15/2009

Electronic Signature of Signing Officer or Director — Date