

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746394

**FILED**  
**Apr 29, 2014**  
**Secretary of State**  
**CC0464888867**

**Entity Name:** BRICKELL FOREST CONDOMINIUM, INC.

**Current Principal Place of Business:**

M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42 STREET, SUITE 203  
MIAMI, FL 33175

**Current Mailing Address:**

M&E ASSOCIATES OF MIAMI, INC.  
1021 OAK ST.  
JACKSONVILLE, FL 32204 US

**FEI Number:** 59-2057429

**Certificate of Status Desired:** Yes

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

SKRLD, INC.  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name KARAS, CHRISTINE  
Address M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42 STREET, SUITE 203  
City-State-Zip: MIAMI FL 33175

Title VP  
Name GONCALVES, MARCIO  
Address M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42 STREET, SUITE 203  
City-State-Zip: MIAMI FL 33175

Title T  
Name SIA, EMILIE  
Address M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42 STREET, SUITE 203  
City-State-Zip: MIAMI FL 33175

Title S  
Name RAVACHI, SHIRLEY  
Address M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42 STREET, SUITE 203  
City-State-Zip: MIAMI FL 33175

Title D  
Name TORRICELLA, ROBERTO  
Address M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42 STREET, SUITE 203  
City-State-Zip: MIAMI FL 33175

Title D  
Name GARCES, IVAN  
Address M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42 STREET, SUITE 203  
City-State-Zip: MIAMI FL 33175

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHRISTINE KARAS

P

04/29/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date