

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000083439

**Entity Name:** 1610 VUE AT BRICKELL, INC

**Current Principal Place of Business:**

3956 TOWN CENTER BLVD  
STE 130  
ORLANDO, FL 32837

**FILED**  
**Jan 04, 2016**  
**Secretary of State**  
**CC1088355482**

**Current Mailing Address:**

3956 TOWN CENTER BLVD  
STE 130  
ORLANDO, FL 32837 US

**FEI Number: 80-0885588**

**Certificate of Status Desired: No**

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

GARCES, PAUL  
31 SE 5TH STREET  
STE CU 412  
MIAMI, FL 33131 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 GARCES, PAUL  
Address 3956 TOWN CENTER BLVD  
STE 130  
City-State-Zip: ORLANDO FL 32837

Title VP  
Name GARCES, MARIEL  
Address 3956 TOWN CENTER BLVD  
STE 130  
City-State-Zip: ORLANDO FL 32837

Title VP  
Name GARCES, GABRIELA  
Address 3956 TOWN CENTER BLVD  
STE 130  
City-State-Zip: ORLANDO FL 32837

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

**SIGNATURE: GABRIELA GARCES**

**VP**

**01/04/2016**

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

\_\_\_\_\_  
Date