

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727915

FILED  
Mar 10, 2011  
Secretary of State

Entity Name: BRICKELL FOUNTAINS, INC.

**Current Principal Place of Business:**

1990 BRICKELL AVENUE  
C/O NEIL DELEON, UNIT F  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

1990 BRICKELL AVENUE  
C/O NEIL DELEON, UNIT F  
MIAMI, FL 33129

**New Mailing Address:**

FEI Number: 59-2091699

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DELEON, NEIL  
66 WEST FLAGLER STREET  
SUITE 800  
MIAMI, FL 33130 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

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: DELEON, NEIL  
Address: 1990 BRICKELL AVE., # F  
City-St-Zip: MIAMI, FL 33129

Title: V, D  
Name: VERDEJA, ISABEL  
Address: 1990 BRICKELL AVE., # K  
City-St-Zip: MIAMI, FL 33129

Title: STD  
Name: WAGLE, SONIA  
Address: 1990 BRICKELL AVE., # P  
City-St-Zip: MIAMI, FL 33129

Title: D  
Name: GIGNOLA, FLOREZ  
Address: 1990 BRICKELL AVE., # E  
City-St-Zip: MIAMI, FL 33129

Title: D  
Name: DIAZ, XIMENA  
Address: 1990 BRICKELL AVE., # L  
City-St-Zip: MIAMI, FL 33129

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: NEIL A DELEON

P

03/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date