2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 766407

1. Entity Name



03-26-2003 90139 038 ****61.25

FILED

Mar 26, 2003 8:00 am Secretary of State

IMPERIAL AT BRICKELL CONDOMINIUM ASSOCIATION, IN

Principal Place of Business Mailing Address 1627 BRICKELL AVENUE 1627 BRICKELL AVENUE 90061363 MIAMI FL 33129 MIAMI FL 33129 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-2252245 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **BECKER & POLIAKOFF, P.A.** Street Address (P.O. Box Number is Not Acceptable) **5201 BLUE LAGOON DRIVE** SUITE 100 **MIAMI FL 33126** City Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete TITLE President ☐ Addition GENTRY, SAMUEL W JR NAME 1404 1627 BRICKELL AVE 2901 STREET ADDRESS STREET ADDRESS 33129 CITY-ST-ZIP **MIAMI FL 33129** CITY-ST-ZIP TITLE ☐ Addition ☐ Delete TITLE PALLOT, MINDY NAME NAME -1802 1627 BRICKELL AVENUE 1802 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33129 Addition ☐ Delete TITLE REIS. DANNY V NAME" NAME 2407 1627 BRICKELL AVE 404 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33129 SD Change ☐ Addition TITLE RIVELLA, JOHN NAME NAME : 1804 1627 BRICKELL AVE. #1107 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33129** CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE HUSTON, MARY NAME NAME 廿 2201 1627 BRICKELL AVE # 1804 STREET ADDRESS STREET ADDRESS 3314 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33129 TITLE TITLE ☐ Addition RIVELLA, JOHN NAME NAME 1627 BRICKELL AVE 2501 STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 ex-

CITY-ST-ZIP

SIGNATURE

MIAM! FL 33129

CITY-ST-ZIP