

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Jul 26, 1999 8:00 am**  
**Secretary of State**  
 07-26-1999 90007 037 \*\*\*550.00



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**

DOCUMENT # **F93000000471**  
 1. Corporation Name  
**LODEX BRICKELL, INC.**



Principal Place of Business Mailing Address  
**1180 AVENUE OF THE AMERICAS, 18TH FLOOR** **1180 AVENUE OF THE AMERICAS, 18TH FLOOR**  
**NEW YORK NY 10036** **NEW YORK NY 10036**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		02/01/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		13-3696937	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	25	29	30		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES STREET STE 105 TALLAHASSEE FL 32301				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			85 Zip Code
			FL				

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent sign)  
 Signature, typed or printed name of registered agent and title if applicable.

12. OFFICERS AND DIRECTORS		13. AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANSEY, FRANCIS X	1.2 NAME	C/O DRA ADVISORS, INC.
STREET ADDRESS	50 GLENBROOK ROAD, #11-C	1.3 STREET ADDRESS	1180 AVENUE OF THE AMERICAS,
CITY-ST-ZIP	STAMFORD CT 06902	1.4 CITY-ST-ZIP	18TH FLOOR NEW YORK NY 10036
TITLE	VS <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUMMERS, BRIAN T	2.2 NAME	BRIAN T. SUMMERS
STREET ADDRESS	132 SPRING VALLEY RD	2.3 STREET ADDRESS	C/O DRA ADVISORS, INC.
CITY-ST-ZIP	PARK RIDGE NJ	2.4 CITY-ST-ZIP	1180 AVENUE OF THE AMERICAS,
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUSKI, DAVID	3.2 NAME	18TH FLOOR NEW YORK, NY 10036
STREET ADDRESS	1180 AVE OF AMERICAS	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Francis X Tansey* 7/19/99 212 7643210

CR2E034 (5/99)