## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # H34619

BRICKELL VIEW CORPORATION

P	rincipal Place	of Busines	S	Mailing Add	Mailing Address									
1901 BRICKELL AVE. APT. B1003 MIAMI FL 33129					1901 BRICKELL AVE. APT. B1003 MIAMI FL 33129				DO NOT WI	DITE IN TU	IIC CDAC	=		
									1	Date Incorporated or Qualife		IIS SPACE		
					•				3.		a	•		
}									╽.	12/18/1984			T	
2.	, Principal Pl	ace of Busi	ness	2a. Mailing	Address <sub>.</sub>				4.	, FEI Number	•	-		ied For
21				26					_	59-2678983		<b>*</b>		Applicable
22	Suite, Apt. 7	#, etc.	-	<b>—</b>	Suite, Apt. #, etc.			5. Certificate of Status Desired   \$8.75 Addition Fee Required						
Çity & State					City & State				6. Election Campaign Financing \$5.00 May Be					
23	n '			28	28				Trust Fund Contribution		Ad	ded to	Fees	
23	Zip		Country	Zip		Coun	itry		8.	. This corporation owes the co	ırrent year	Intangible		
24	<b>-</b> '		25	29	Į.	30				Personal Property Tax.		□Ye		No
24	· ·	0 Name				1			10. Name and Address of New Regis			istered Agent		
Name and Address of Current Registered Agent								Name						
MOMAYEZZADEH, ABDOLREZA										D.O. Boulden in Mat Anna	ntable)			
1901 BRICKELL AVE. APT. B1003							82	Street Addre	ess (I	P.O. Box Number is Not Acce	plable)			
MIAMI FL 33129-8736							83				11.1			4 34 66
														1
							84	City				L  85	Zip C	ode '
	<u></u>	:	<u> </u>							hmite this etatement for t			ing its r	egistered
1	deffine or re	agistored as	sions of Sections 607 gent, or both, in the Si rith, and accept the ob	tate of Florida, Such	change was au	umorizea	DV U	he corporation	n's b	on submits this statement for the sound of directors. I hereby account to the state of the state	ept the ap	pointment	as regi	stered
s	SIGNATURE							•	4		DATE			
_		Signature, type	d or printed name of registered				egistered Agent signature required			ADDITIONS/CHANGES TO		AND DIR	ECTOR	S IN 12
_	2.	-	OFFICERS	S AND DIRECTORS	DELETE	13.	_			ADDITIONS/CHANGES TO C	JELIO EKO			Addition
TI	TLE PD				<del></del>			1.1 TITLE		, , , , , , , , , , , , , , , , , , , ,				_
N	AME		ezzadeh, abdolf		i i			1.2 NAME						
STREET ADDRESS 1901 BRICKELL AV #81003				3				1.3 STREET ADDRESS						
C	TTY-ST-ZIP	MIAMI F	L			1.4 CIT		-ZIP						Addition
П	ΠLE				☐ DELETE	2.1 111				•		CI	lange	☐ Audition
N.	AME					2.2 NAME			·					
s	STREET ADDRESS				2.3 STREET ADDRESS			ADDRESS						
	CITY-ST-ZIP							2.4 CITY-ST-ZIP			±0 ·			
1	ITLE				DELETE	3.1 TIT	LE					. □ CI	nange	☐ Additio
l N	IAME			_		3.2 NA	ME						,	
	TREET ADDRESS	#			•	3.3 ST	REET	ADDRESS		e e e				3835
-	\$ 7-1	# 31 Dec				3.4. CI		·			:			
_	ITY-ST-ZIP				DELETE	4.1 TIT						c	hange	Additio
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١ '	IAME		<i>.</i>	•				ADDRESS						
S	TREET ADDRESS					4.3 51	KEE I	ALIUKESS		•				

6.4 CITY+ST-ZIP 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

Change

☐ Change

Addition

Addition

**FILED** 

Jan 22, 1999 8:00am

**Secretary of State** 

01-22-1999 90014 009 \*\*\*150.00