

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023118

FILED  
Jul 13, 2005  
Secretary of State

**Entity Name:** BRICKELL INN APARTMENTS, LLC

**Current Principal Place of Business:**

1950 BRICKELL AVE.  
MIAMI, FL 331

**New Principal Place of Business:**

1950 BRICKELL AVE.  
MIAMI, FL 33139

**Current Mailing Address:**

3530 ROCKERMAN RD.  
MIAMI, FL 33133 US

**New Mailing Address:**

FEI Number: 20-1092479      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

FERRAO, DERICK J  
3530 ROCKERMAN RD.  
MIAMI, FL 33133 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FERRAO, DERICK J  
Address: 3530 ROCKERMAN RD.  
City-St-Zip: MIAMI, FL 33133

Title: MGR ( ) Delete  
Name: FERRAO, YVONNE  
Address: 3530 ROCKERMAN RD.  
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DERICK FERRAO

MR.

07/13/2005

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date