2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2007 8:00 am
Secretary of State

03-06-2007 90079 039 ****50.00

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1. Entity Name
BRICKELL BAY COMMERCIAL, LLC

Principal Place of Business
100 S. BISCAYNE BLVD., SUITE 1100
MIAMI, FL 33131

Mailing Address
100 S. BISCAYNE BLVD., SUITE 1100
MIAMI, FL 33131

01162007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1268162

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HOLLO, JEROME
100 S BISCAYNE BLVD STE 1100
MIAMI, FL 33131

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HOLLO, JEROME
STREET ADDRESS	100 S. BISCAYNE BLVD., SUITE 1100
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	MGRM
NAME	HOLLO, WAYNE
STREET ADDRESS	100 S. BISCAYNE BLVD., SUITE 1100
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	MGRM
NAME	HOLLO, TIBOR
STREET ADDRESS	100 S. BISCAYNE BLVD., SUITE 1100
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	MGR
NAME	BEAR, STEVE
STREET ADDRESS	100 S. BISCAYNE
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	MGR
NAME	KATZ, LEONARD
STREET ADDRESS	100 S BISCAYNE BLVD
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Leonard Katz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

03 5-1310