

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000097355

FILED
Jul 06, 2007
Secretary of State

Entity Name: BRICKELL EXECUTIVE OFFICES, LLC

Current Principal Place of Business:

201 S. BISCAYNE BLVD
SUITE 2828
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

201 S. BISCAYNE BLVD
SUITE 2828
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-1296043 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:

ROCCA, GIADA
1101 BRICKELL AVENUE
STE. 1003-N
MIAMI, FL US

Name and Address of New Registered Agent:

FERREIRA, GINA
201 S BISCAYNE BLVD
STE 2828
MIAMI, FL 33131 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: GINA FERREIRA

07/06/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LOPEZ JORDAN, GONZALO
Address: 201 S. BISCAYNE BLVD, STE. 2828
City-St-Zip: MIAMI, FL 33131 US

Title: MGR () Delete
Name: STEED, SANTIAGO
Address: 201 S. BISCAYNE BLVD, STE. 2828
City-St-Zip: MIAMI, FL 33131 US

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 exemption stated in Chapter 119, 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: GONZALO LOPEZ JORDAN

MGR

07/06/2007

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