

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103743

FILED
Apr 29, 2009
Secretary of State

Entity Name: BRICKELL PROPERTY SERVICES, LLC.

Current Principal Place of Business:

1110 BRICKELL AVENUE
505
MIAMI, FL 33131

New Principal Place of Business:

1302 NE 105 STREET
MIAMI SHORES, FL 33138

Current Mailing Address:

1110 BRICKELL AVENUE
505
MIAMI, FL 33131

New Mailing Address:

1302 NE 105 STREET
MIAMI SHORES, FL 33138

FEI Number: 26-1251443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUILERA, EUGENIO
1302 NE 105 ST
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

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: AGUILERA, EUGENIO
Address: 1302 NE 105 ST
City-St-Zip: MIAMI, FL 33138

Title: MGRM () Delete
Name: QUINTANA, RAUL
Address: 1110 BRICKELL AVENUE #505
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: QUINTANA, MAURA
Address: 1110 BRICKELL AVENUE #505
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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

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: EUGENIO AGUILERA

PD

04/29/2009

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