

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000047509

FILED
Apr 09, 2012
Secretary of State

Entity Name: 1500 BRICKELL APARTMENTS, LLC

Current Principal Place of Business:

791 CRANDON BLVD.
1102
MIAMI, FL 33149 US

New Principal Place of Business:

791 CRANDON BLVD.
1102
KEY BISCAVNE, FL 33149 US

Current Mailing Address:

791 CRANDON BLVD.
1102
MIAMI, FL 33149 US

New Mailing Address:

791 CRANDON BLVD.
1102
KEY BISCAVNE, FL 33149 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARLADE, ALBERTO J ESQ
7050 SW 86 AVENUE
MIAMI, FL 33143 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
Name: 1501 BLUE CORNER, INC.
Address: 791 CRANDON BLVD., # 1102
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR
Name: ELIAS, FRANCISCO
Address: 791 CRANDON BLVD., # 1102
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR
Name: SALDIVIA DE ELIAS, BEATRIZ
Address: 791 CRANDON BLVD., # 1102
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR
Name: ELIAS, MARIA BEATRIZ
Address: 791 CRANDON BLVD., # 1102
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR
Name: ELIAS, MARIA LAURA
Address: 791 CRANDON BLVD., # 1102
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR
Name: ELIAS, FRANCISCO JOSE
Address: 791 CRANDON BLVD., # 1102
City-St-Zip: KEY BISCAVNE, FL 33149 US

I hereby 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: FRANCISCO ELIAS

MGR

04/09/2012

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