## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF COPPORATIONS

1998 **DOCUMENT** # N00046

(5)

## BRICKELL EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address						2 (02)((10) DIT GOLIL GOLIL GOLIL GIGIO 21(1 DIBLE 816)) AIRT SEGI AIRT AIRT AIRT AIRT AIRT AIRT AIRT AIR		
151 S.E. 15TH ROAD MIAMI FL 33129		151 S.E. 15TH ROAD	151 S.E. 15TH ROAD MIAMI FL 33129			3. Date Incorporated or Qualified		··
		MIAMI FL 33129				11/28/1983		
						4. FEI Number		Applied For
						59-2464256		Not Applicable
2. Principal Place of Business 28. Malling Adi			vddress			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc.						6. Election Campaign Financing		May Be
2 27						Trust Fund Contribution		to Fees
City & State City & State						7. Is this nonprofit corporation a homeowners association?		
28						X Yes ☐ No		
Zip	Country Zip		Country			8. This corporation owes or has paid the current year Intangible		
24	25 29 30		30			□ No		
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered A	gent	
				81	Name			
CASTRO, ENRIQUETA I.			ł	62	Street Addre	ess (P.O. Box Number is Not Acceptable)		
151 S.E. 15TH ROAD				Ť-/	00017.00.0			
	L 33129			83				
			í	84	O		14-1-2	ip Code
				٣'	City	FL	85 Z	ip Code
SIGNATURE	Signature, typoid or printed name of registered OFFICERS /	agent and tille if applicable AND DIRECTORS	(NOTE: Registered	Age	nt signature require	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12
TITLE	D	DELET	1.1 10	LE			Chang	e Addition
NAME	MACHADO, MARCOS		1.2 NA	1.2 NAME				
STREET ADDRESS	151 SE 15 RD #603		1.3 \$1	REET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CII	Y-S	t-zip			
TITLE	VP	☐ DELET		_		ARReto, Denis,	Chang	e 🔲 Additio
NAME	BARRETO, DENIS		2.2 NAM			1 5. K. 15# Pd. #301 11	~ L	
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS		1 3 . K. 13 " 14	リャ	
CITY-ST-ZIP	MIAMI FL		2.40		1/13	aui - 71. 38129		
TITLE	TD	DELET			111	emaca Elema	Chang	e Additio
NAME	MENDEZ, ELENA		3.2 NA	ME	1 1	15 8 15 M Rd #401 117		
STREET ADDRESS	151 S.E. 15TH RD. #401		3.3 \$1	AEET	ADDRESS 5	11 9. X. 15 10 11	711	
CITY-ST-ZIP	MIAMI FL		3.4. CI		{ 1.	iani - H. 33139 🚆		
TITLE	PD	☐ DELET		_			Chang	e Additio
NAME	BARR, SAM		4.2 N		l			
	Table 2   Tabl							
STREET ADDRESS	MIAMI FL		4.3 ST	ME	ADDRESS			
	1			AME REET	T-71P			
STREET ADDRESS CITY-ST-ZIP TITLE	S	DELET	4.4 CF	AME REET TY-S	T-71P	an + Michael	Chang	pe 🔲 Additio
CITY-ST-ZIP	S PARENTI MICHAEI	DELET	4,4 CF	ame Reet TY-S	T-71P	Vecti, Michael Rd 11-	☐ Chang	ge Additio
CITY-SI-ZIP TITLE NAME	PARENTI, MICHAEL	DELET	4.4 Cf 5.1 Til 5.2 NA	ame Reet TY-S TLE	Y-ZIP Pa	Vecti, Michael 51 S.E. Bin Rd. 117	Chang	ge Addition
CITY-ST-ZIP TITLE	, •	[ ] DELET	4.4 C/ 5.1 T/ 5.2 NA 5.3 ST	AME REET TY-S TLE ME REET	Y-ZIP Pa	Vecti, Michael 51 S.E. 15th Rd. 11]	□ Chang	pe 🔲 Additio

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

shot qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an enpowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in address.

**FILED** 

Feb 16 1998 8:00am

Secretary of State

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**SIGNATURE** 

ed with this filing does mental annual report is

CITY-ST-ZIP

STREET ADDRESS

Thereby certify that the information/supplindicated on this annual roport or supply officer or director of the corporation or yield block 12 or Block 13 if changed or on a

TITLE

NAME

☐ Change

Addition