


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90055 040 ****61.25

DOCUMENT # N00046					
1. Entity Name BRICKELL EAST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 151 S.E. 15TH ROAD MIAMI, FL 33129		Mailing Address C/O THE CONTINENTAL GROUP 11981 SW 144 CT, STE 201 MIAMI, FL 33186			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2464256	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SKRLD, INC. 201 ALHAMBRA CIR STE 1102 MIAMI, FL 33134			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	Mendez, ELENA - Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLMITEH, BETH		NAME	151 SE 15th Road	
STREET ADDRESS	151 SE 15TH RD		STREET ADDRESS	Miami, FL 33129	
CITY-ST-ZIP	MIAMI, FL 33129		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE	D Lopez, Carlos	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LATORRE, JORGE		NAME	151 SE 15th Road	
STREET ADDRESS	151 S.E. 15TH ROAD		STREET ADDRESS	Miami, FL 33129	
CITY-ST-ZIP	MIAMI, FL 33129		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANTA COLOMA HERNANDEZ		NAME		
STREET ADDRESS	151 S.E. 15TH ROAD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33129		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIEHL, HERMAN E		NAME		
STREET ADDRESS	151 SE 15TH RD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33129		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, SUE		NAME		
STREET ADDRESS	151 SE 15TH RD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33129		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAHALLATI, ALI		NAME		
STREET ADDRESS	151 SE 15TH RD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33129		CITY-ST-ZIP		
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____		President of Board		4-12-07	
SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	