## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07000011085

**FILED** May 01, 2008 Secretary of State

Entity Name: 500 BRICKELL MASTER ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

500 BRICKELL AVENUE MIAMI, FL 33131

**Current Mailing Address:** 

**New Mailing Address:** 

500 BRICKELL AVENUE MIAMI, FL 33131

FEI Number: 26-2368016 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ATLANTIC & PACIFIC MANAGEMENT 800 PALM TRAIL SUITE 2 DELRAY BEACH, FL 33483 US

CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410

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: YULIA OGURCHIKOVA, ASST. SECRETARY

05/01/2008

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Name:

Address:

City-St-Zip:

(X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete PEREZ, JORGE M ROCHA, ROBERTO Name: 500 BRICKELL AVENUE Address: 500 BRICKELL AVENUE MIAMI, FL 33131 MIAMI, FL 33131 City-St-Zip:

Title: DVS () Delete Title: DV (X) Change ( ) Addition HOYOS, JEFFERY Name: Name: ROSSO, CARLOS

Address: 500 BRICKELL AVENUE Address: 500 BRICKELL AVENUE City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: DV () Delete Title: DST (X) Change ( ) Addition

ALLEN, MATT D Name: POZZO, TONY D Name: 500 BRICKELL AVENUE 500 BRICKELL AVENUE Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BY Y. OGURCHIKOVA ATTY-IN-FACT Ρ 05/01/2008