

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000293

FILED
Jan 08, 2009
Secretary of State

Entity Name: 1060 BRICKELL CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

1060 BRICKELL AVENUE
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1060 BRICKELL AVENUE
MIAMI, FL 33131

New Mailing Address:

1060 BRICKELL AVENUE, OFFICE
MIAMI, FL 33131

FEI Number: 20-0386392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIEBER, OREN D ESQ
555 NE 15 STREET SUITE 100
MIAMI, FL 33132 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

OFFICERS AND DIRECTORS:

Title: DPAS () Delete
Name: BARNETT, GARY
Address: 805 THIRD AVE 7TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: DVPS () Delete
Name: SPITZER, MOSHE
Address: 805 THIRD AVE 7TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: DVPT () Delete
Name: TERECH, HENRY
Address: 805 THIRD AVE 7TH FLOOR
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SETR (X) Change () Addition
Name: FAERMAN, FABIO
Address: 1060 BRICKELL AVENUE, OFFICE
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: GARY BARNETT

DPAS

01/08/2009

Electronic Signature of Signing Officer or Director

Date