

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90066 047 ***150.00

DOCUMENT # P02000131703
1. Entity Name
BRICKELL BAY ENTERTAINMENT AND DEVELOPMENT COMPANY

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 601 BRICKELL BAY DRIVE Suite, Apt. #, etc. 470 City & State MIAMI, FL Zip 33131		3. Mailing Address SAME Suite, Apt. #, etc. City & State Zip Country USA	
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DO NOT WRITE IN THIS SPACE

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name DANIEL E. JONAS, ESQ.
Street Address (P.O. Box Number is Not Acceptable) 300-71st STREET SUITE 405 City MIAMI BEACH FL Zip Code 33141

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT JUAN ABEL BARROSO PINO 11930 N. BAYSHORE DRIVE, #708 MIAMI, FL 33181	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE PRESIDENT SUSAN RODMAN 235 N. HIBISCUS DRIVE MIAMI BEACH, FL 33139	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TREASURER/SECRETARY YALE SAMOLE 235 N. HIBISCUS DRIVE MIAMI BEACH, FL 33139	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or on an amendment with an address, with all other like empowered.

SIGNATURE: YALE M. SAMOLE Date: 4/23/02 Daytime Phone #: 305 409 6059

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)