2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000170535

Address: City-St-Zip:

MIAMI, FL 33134

FILED Sep 23, 2005 Secretary of State

Entity Name: BRICKELL MIAMI 43C, INC. **New Principal Place of Business: Current Principal Place of Business:** 1200 BRICKELL AVE STE 900 MIAMI, FL 33134 **Current Mailing Address: New Mailing Address:** 1200 BRICKELL AVE STE 900 MIAMI, FL 33134 FEI Number: 20-2725619 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: AGI REGISTERED AGENTS, INC. 1200 BRICKELL AVE STE 900 MIAMI, FL 33131 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: ROBERT R ADAMS Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPST () Delete () Change () Addition DE ANDRES, DAVID R Name: Name: 1200 BRICKELL AVE STE 900 Address: Address: City-St-Zip: MIAMI, FL 33134 City-St-Zip: () Delete Title: DVST Title: () Change () Addition MEZA HERRERO, JUAN M Name: Name: 1200 BRICKELL AVE STE 900 Address: Address: MIAMI, FL 33134 City-St-Zip: City-St-Zip: Title: Title: DVST () Delete () Change () Addition GARCIA, EMILIO M Name: Name: 1200 BRICKELL AVE STE 900 Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DAVID R DE AND	RFS P	09/23/2005