

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000031410

Entity Name: 500 BRICKELL 3404, INC

FILED
Oct 06, 2009
Secretary of State

Current Principal Place of Business:

CCS 6369 PO BOX 025323
MIAMI, FL 33102/532

New Principal Place of Business:

55 SE 6 ST
3404
MIAMI, FL 33131

Current Mailing Address:

17600 COLLINS AVENUE
SUNNY ISLES, FL 33160

New Mailing Address:

55 SE 6 ST
3404
MIAMI, FL 33131

FEI Number: 20-5045489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBAYNA, MARIA E
17600 COLLINS AVENUE
SUNNY ISLES, FL 33160 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: MARIA E ROBAYNA

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:

Title: VP () Delete
Name: PINEDA DE TRUJILLO, ALEXA
Address: CCS 6369 PO BOX 025323
City-St-Zip: MIAMI, FL 33102/532

Title: VP () Delete
Name: TRUJILLO, MARIA A
Address: CCS 6369 PO BOX 025323
City-St-Zip: MIAMI, FL 33102/532

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BRETT, OMAR S
Address: 55 SE 6 ST, APT 3404
City-St-Zip: MIAMI, FL 33131

Title: VP (X) Change () Addition
Name: RODRIGUEZ, ANGELA M
Address: 55 SE 6 ST, APT 3404
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OMAR S BRETT

VP

10/06/2009

Electronic Signature of Signing Officer or Director

Date