

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000142457

FILED
Feb 25, 2007
Secretary of State

Entity Name: BRICKELL PROPERTY MANAGEMENT INC.

Current Principal Place of Business:

51 SW 11 STREET
APT 1220
MIAMI, FL 33130 US

New Principal Place of Business:

51 SW 11 STREET
SUITE 1220
MIAMI, FL 33130 US

Current Mailing Address:

51 SW 11 STREET
APT 1220
MIAMI, FL 33130 US

New Mailing Address:

51 SW 11 STREET
SUITE 1220
MIAMI, FL 33130 US

FEI Number: 20-5878117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALYA, SCOTT
51 SW 11 STREET
APT 1220
MIAMI, FL 33130 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: GALYA, SCOTT
Address: 51 SW 11 STREET, APT 1220
City-St-Zip: MIAMI, FL 33130 US

Title: VP,D () Delete
Name: ROTHMAN, JESSICA
Address: 51 SW 11 STREET, APT 1220
City-St-Zip: MIAMI, FL 33130 US

Title: SE,D () Delete
Name: GALYA, TRACY
Address: 11415 SW 113 TERR
City-St-Zip: MIAMI, FL 33176 US

Title: TR,D () Delete
Name: GALYA, JOYCE
Address: 11415 SW 113 TERR
City-St-Zip: MIAMI, FL 33176 US

Title: ME,D () Delete
Name: SHUTER, LOUIS
Address: 11415 SW 113 TERR
City-St-Zip: MIAMI, FL 33176 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SG

PD

02/25/2007

Electronic Signature of Signing Officer or Director

Date