FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P16152

(1)

BRICKELL DELAWARE, INC.

FILED	
May 06 1998 8:00an	n
Secretary of State	



				<u></u>		i ilgi (jan) anari anth albigaile	
Princ	Ipal Place of Business	Mailing Address	-				
255 SHORELINE DRIVE 255 SHORELINE DRIVE]		
SUITE 600		SUITE 600	A0E		DO NOT WORK IN THE COLOR		
REDWOOD CITY CA 94065 REDWOOD CITY CA 94065			V03		3. Date Incorporated or Qualifie	ITE IN THIS SPACE	
					09/29/1987	o .	
2. Pr	incipal Place of Business	2a, Mailing Address			4. FEI Number	TΔn	plied For
21	,	26 26			94-3050149		t Applicable
	uite, Apt. #, etc.	Suite, Apt #, etc.				_ ¢9.75	
22		27			5. Certificate of Status Desired	Fee Re	
	ty & State	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28]	28]		Trust Fund Contribution	Added t	
Zij	p Country	Zip	Country		8. This corporation owes or has		
24	25	29	30		Personal Property Tax due Ju		No
	Name and Address of Curren	t Registered Agent		T N	10. Name and Address of New	Registered Agent	
	CT CORPORATION SYSTEM		81	Name			
	1200 S. PINE ISLAND ROAD		8:	Street	Address (P.O. Box Number is Not Accept	table)	
	PLANTATION FL 33324			,			
			83	^ [
			84	City		85 Zip (Code
				J		FL 2 P	
a	Pursuant to the provisions of Sections 607.050/ office or registered agent, or both, in the State opent. I am familiar with, and accept the obligate IATURE	itions of, Section 607.0505, F	Florida Statute	es.			registered
40	Signature, typicd or printed name of required ago:	~		arulangia Inog	required when reinstating)	DATE DIRECTOR	0.11.40
12. TITLE	OFFICERS AND	DELETE	13. 1.1 YOLE		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTOR Change	S IN 12 Addition
	CARP, MICHAEL	L_J OFFICE	1.2 NAME		Gregory Johnson	C Ollandic	LZE AGGICION
NAME	TREET ADDRESS 255 SHORELINE DRIVE, #600			T ADDRESS	255 Shoreline Driv	e. #600	
	BENWOOD CITY ON COLLO				REDWOOD City, CA	94065	
CITY-S	DP DP	☐ DELET E	1.4 City- 2.1 Title	S1-ZIP	Director /VP	Change	Addition
NAME	TCHEAU, GUY		2.2 NAME		Scott Peterson	e e	7
	ADDRESS 255 SHORLINE DRIVE			T ADDRESS	255 Shoreline Drive	e #600	
CITY-S	DEDWOOD CITY ON COLOR	65	2.4 CITY		Redwood City, CA	94065	
TITLE	DV	DELETE	3.1 TITLE	-31-21	Meendow. Crigitis	Change	Addition
NAME	CHILD, S, BRADFORD		3.2 NAME			_ ···- , ·	
	ADDRESS 255 SHORELINE DR #600			T ADDRESS			
CITY-S	DEDWOOD CITY CA 04065	74065	3.4. City				
TITLE	8	DELETE	4.1 TITLE	51-511		Change	☐ Addition
NAME	PATEL, REKHA		4. 2 NAMI			_ ~ ~ ~ ~ ~ ~	
_	ADDRESS 255 SHORELINE DR #600			T ADDRESS			
CITY-S	DEDWOOD CITY OF DIOSE	94065	4.4 CITY-				
TITLE		DELET E	5.1 TITLE	<u></u>		Change	Addition
NAME			5.2 NAME		ennones		
	ADDRESS		4	T ADDRESS	6000025 -05/07/9801	4. 70.30 N1NN49	i
CITY-S			5.4 CITY-		***600.00	010 013	
TITLE	11741	DELETE	6.1 TITLE	31 211	3354000400	Change	Addition
NAME			6.2 NAME				_ ,/\
	ADDRESS		1	T ADDRESS			
OITV. C				et 710) 5

14. Thereby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 12 or Block 13 if changed, or on an attachment with an address.