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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000027064 (1)

1. Corporation Name:
BRICKELL PLAZA EQUITIES, INC.



Principal Place of Business
160 WEST FLAGLER STREET
MUSEUM TOWER SUITE 2704
MIAMI FL 33130

Mailing Address
160 WEST FLAGLER STREET
MUSEUM TOWER SUITE 2704
MIAMI FL 33130-1586

3. Date Incorporated or Qualified
04/03/1995

3a. Date of Last Report
05/01/1996

2. Principal Place of Business
21 100 S.E. 2ND STREET

2a. Mailing Address
26 100 S.E. 2ND STREET

4. FEI Number
65-0580073

Applied For
Not Applicable

22 Suite, Apt. #, etc.
37TH FLOOR

27 Suite, Apt. #, etc.
37TH FLOOR

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 City & State
MIAMI, FLORIDA

28 City & State
MIAMI, FLORIDA

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip
33131

25 Country

29 Zip
33131

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEFELER, MONIQUE T
160 WEST FLAGLER STREET
MUSEUM TOWER SUITE 2704
MIAMI FL 33130

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
100 S.E. 2ND STREET, 37TH FLOOR

83

84 City

MIAMI

FL

85 Zip Code
33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Monique J. Befeler*

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME BEFELER, MONIQUE T
STREET ADDRESS 160 WEST FLAGLER STREET STE 2704
CITY- ST- ZIP MIAMI FL 33130

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME (Address)
1.3 STREET ADDRESS 100 S.E. 2ND STREET, 37TH FLOOR
1.4 CITY- ST- ZIP MIAMI, FLORIDA 33131

TITLE D ☐ DELETE
NAME DELGADO, MIREYA
STREET ADDRESS 200 SE 15TH ROAD UNIT 8F
CITY- ST- ZIP MIAMI FL 33129

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Monique J. Befeler*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-23-97

(305) 379-8300

Date

Daytime Phone #

0169341

CR2E034 (9/96)