2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# P97000019175

Entity Name: TERREMARK BRICKELL II, INC.

Current Principal Place of Business:

C/O MILLENNIUM PTRS.
1995 BROADWAY, 3RD FLOOR
NEW YORK, NY 10023

New Principal Place of Business:

Current Mailing Address:

C/O MILLENNIUM PTRS.
1995 BROADWAY, 3RD FLOOR
NEW YORK, NY 10023

New Mailing Address:

FEI Number: 65-0733626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD
STE. 508
MIAMI, FL 33156 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:	VD	( ) Delete
Name:	AARONS, PHILIP E	
Address:	C/O MILLENNIUM PARTNERS 1995 BROADWAY	
City-St-Zip:	NEW YORK, NY 10023	
Title:	VSD	( ) Delete
Name:	LOVETT, PHILIP H	
Address:	C/O MILLENNIUM PARTNERS 1995 BROADWAY	
City-St-Zip:	NEW YORK, NY 10023	
Title:	VTAS	( ) Delete
Name:	HOFFMAN, STEVEN L	
Address:	C/O MILLENNIUM PARTNERS 1995 BROADWAY	
City-St-Zip:	NEW YORK, NY 10023	
Title:	PD	( ) Delete
Name:	JEFFRIES, CHRISTOPHER M	
Address:	C/O MILLENNIUM PARTNERS 1995 BROADWAY	
City-St-Zip:	NEW YORK, NY 10023	
Title:	V	( ) Delete
Name:	JEFFRIES, SEAN	
Address:	C/O MILLENNIUM PARTNERS 1995 BROADWAY	
City-St-Zip:	NEW YORK, NY 10023	
Title:	V	( ) Delete
Name:	JOHNSON, RODERICK	
Address:	C/O MILLENNIUM PARTNERS 1995 BROADWAY	
City-St-Zip:	NEW YORK, NY 10023	

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

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: STEVEN HOFFMAN VTAS 04/13/2009

Electronic Signature of Signing Officer or Director — Date