FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 12, 2002 8:00 am Secretary of State DOCUMENT # P98000099467 1. Entity Name 05-12-2002 90787 001 *4,950.00 BRICKELL CONSTRUCTION CORP. Mailing Address Principal Place of Business C/O 701 BRICKELL AVENUE C/O 701 BRICKELL AVENUE SUITE 3000 SUITE 3000 MIAMI FL 33131 **MIAMI FL 33131** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0900571 Not Applicable Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVENUE **SUITE 3000 MIAMI FL 33131** Zip Code City 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME DE OLAZARRA, ALLEN C STREET ADDRESS 701 BRICKELL AVE., STE 3000 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33131** ☐ Addition Delete ☐ Change TITLE TITLE NAME NAME TOUZET, RODOLPHO PRIO STREET ADDRESS STREET ADDRESS 701 BRICKELL AVE., STE 3000 CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33131 ☐ Addition TITLE Change Delete TITLE NAME NAME FLESH, PAUL STREET ADDRESS STREET ADDRESS 701 BRICKELL AVE., STE. 3000 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 Change ☐ Addition Delete TITLE NAME DUNNE, LORRI STREET ADDRESS STREET ADDRESS 701 BRICKELL AVE., STE. 3000 CITY-ST-ZIP **MIAMI FL 33131** CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like prowered.

NAME STREET ADDRESS

SIGNATURE:

TITLE NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #