FOR PROFIT CORPORATION LINIFORM RUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUI	MENT # P9900010	00069	FILED			
NV BRICKELL STATION, INC. DO NOT WRITE IN THIS SPACE				02 AUG 26 PH 3: 00		
				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
				_		
2. Principal Place of Business 444 Brickell Avenue		3, Mailing Address 4444 Brickell	Avenue			
Suite, Apt. #, etc. Suite 218		Suite, Apt. #, etc. Suite 218		DO NOT WRITE IN THIS SPACE		
Miami, FL		Miami, FL .		4.65-0964148	Applied For Not Applicable	
33131	^{Co} VISA	33131	USA'Y	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
		<u> </u>	Name a	7. Name and Address of Current Registe	red Agent	
	DO NOT V	VRITE		A Street Address (P.C. Box, Number is Not Acceptable) 444 Brickell Avenue, Suite/218		
	IN THIS S	PACE	444 Brickell Avenue, Suite.216			
			City Mia	mi F	L 39131	
8. The above	named entity submits this statemen	for the purpose of changing its	registered office or regis	tered agent, or both, in the State of Florida.		
SIGNATURE.	H.Ke	iffe,		August 23, 2002		
	Signature, typica or printer maine of registered ag	January 1 - M	E: Registered Agunt signature requilary 1 - Fee is \$150.00			
	oration is eligible to satisfy its Intangi requirement and elects to do so. ria on base	After May Amende	1, Fee is \$550.00 d UBR is \$61.25 ble to Department of S	10. Election Campaign Financing Trust Fund Contribution.	S5.00 May Be Added to Fees	
11.	r	ID DIRECTORS				
TITLE NAME	Director J. Kevin Reilly		TITLE NAME			
STREET ADDRESS CITY+ST+ZIP	444 Brickell Aver Miami, FL 33131	nue, Suite 218	STREET ADDRESS CITY+ST-ZIP			
TITLE NAME	D Victor Reichenste	ein	TITLE		4-0000	
STREET ADDRESS	Victor Reichenste 444 Brickell Aver Miami, FL 33131	nue, Suite 218	STREET ADDRESS CITY-ST-ZIP	3000073	43335	
CITY - ST - ZIP TITLE			TITLE			
NAME STREET ADDRESS			NAME STREET AODRESS	DO NOT WE)ITE	
CHY-ST-ZIP TITLE			CHY-ST-ZIP DTLE			
NÁME			NAME STREET ADDRESS	IN THIS SPA	ACE [
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			
TITLE			TITLE NAME			
STREET ADDRESS			STREET ADDRESS A			
CITY-ST-ZIP TITLE			TITLE	7		
NAME STREET ADDRESS			NAME STREET ADDRESS		To you have been a second or second	
CITY-ST-ZIP		· .	CITY-ST-ZIP			
indicated of the col attachme	on this report or supplemental report poration or the receiver or postee on the with an address, with all other like	with this filling does not qualify for it is true and accurate and that tempowered to execute this report of impowered.	r the exemption stated in ny signature shall have th nt as required by Chapte Director	Section 119.07(3)(i). Florida Statutes. I further the same legal effect as if made under oath; that r 607, Florida Statutes; and that my name appoint the statutes of the statutes of the same appoint the same ap	certify that the information at I am an officer or director lears in Block 11 or on an 205–298–9788	
SIGNAT	UKE: //				Denorate Planera	

Date

Dayane Phone ≠

alla Chment

CSC

P990000069

ACCOUNT NO. : 072100000032

REFERENCE: 719353 4330594

AUTHORIZATION :

COST LIMIT : \$ 558.75

ORDER DATE: August 26, 2002

ORDER TIME: 10:43 AM

ORDER NO. : 719353-010

CUSTOMER NO: 4330594

CUSTOMER: Brian A. Hart, Esq

Adorno & Yoss, P.a.

2601 South Bayshore Drive

Suite 1600

Miami, FL 33133

ANNUAL REPORT FILING

NAME: KV BRICKELL STATION, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Ginger Simmons-EXT#1139

EXAMINER'S INITIALS:

OZ AUG 26 AM 11: 56
DEPARTMENT OF STATES
DEVISION OF CORPORATION
DEVISION OF CORPORATION