

2002 UNIFORM BUSINESS REPORT (UBR)

0017352 AT

DOCUMENT # **A97000002585**

1. Entity Name

LEF/PLAZA WEST, LTD.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 MAR 28



Principal Place of Business

Mailing Address

**2601 S. BAYSHORE DRIVE
SUITE 300-A
MIAMI FL 33133-5413**

**ONE GREENWAY PLAZA, SUITE 850
HOUSTON TX 77046-0102**

2. Principal Place of Business

3. Mailing Address

One Greenway Plaza

**Suite, Apt. #, etc.
Suite 850**

Suite, Apt. #, etc.

**City & State
Houston TX**

City & State

**Zip
77046**

**Country
USa**

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

65-0798254

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRIEDMAN, DAVID A
2601 S. BAYSHORE DRIVE
SUITE 300-A
MIAMI FL 33133-5413**

Name
Robert L. Shapiro

Street Address (P.O. Box Number is Not Acceptable)
2627 Ives Dairy Road

Suite 118

City
Aventura

FL

Zip Code
33180

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.

3/01/02
DATE

9. Capital Contributions
as Shown on record.

\$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

Same

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **P97000100948**
NAME **LEF/PLAZA WEST, INC.**
STREET ADDRESS **2601 S. BAYSHORE DRIVE., STE. 300-A**
CITY-ST-ZIP **MIAMI FL 33133-5413**

STREET ADDRESS **One Greenway Plaza, Suite 850**
CITY-ST-ZIP **Houston, Texas 77046**

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CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes **LEF/Plaza West, Ltd., by its**

general partner, LEF/Plaza West Inc. by Sandra E. Ray, VP and Secretary

SIGNATURE: **SIGNATURE REQUIRED**

3.5.02

713-850-1850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE