FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000019572

LNR CALIFORNIA INVESTMENTS, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90246 036 ***150.00



Principal Place	Mailing Address								
760 NW 107TH AVE 760 NW 107TH AVE					1				
MIAMI FL 33172	2	MIAMI FL 33172				DO NOT WRITE IN THIS SPACE			
US US					3. Date Incorporated or Qualifed				
					03/10/1995			1	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Apr	plied For	
21 26 26					65-0563643			t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						— ¬	\$8.75 A	dditional	
21 Suite 200 27 Suite 30			OC		5. Certifcate of Status Desired		Fee Re	quired	
City & Stat	/ \ 	City & State			6. Election Campaign Financing		\$5.00	May Be	
23	28			Trust Fund Contribution		Added t	o Fees		
Zip	Zip Country Zip C			,	8. This corporation owes the current	t year Intan		_	
24	25 29 30		ol		Personal Property Tax. ✓ Yes No				
	9. Name and Address of Curre	ent Registered Agent		·	10. Name and Address of New Reg	istered Ag	jent		
			81	Name				1	
RUBIN, SHELLY 760 NW 107TH AVE			82	Street	Address (P.O. Box Number is Not Acceptable	e)			
		}		XV 4e300					
MIAMI FL 33172			83	1					
,			84	City		FL	85 Zip (Code	
				<u> </u>	at the state of th		anging its	ragistared	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat im familiar with, and accept the oblic	e of Florida. Such change was auth	iorized Dy	the corpo	corporation submits this statement for the purchasion's board of directors. I hereby accept to	he appointr	nent as re	gistered	
SIGNATURE	Signature, typed or printed name of registered as	and title if applicable /NOTE: Ro	wietered Ane	nt sinnahtre r	equired when reinstating)	DATE		{	
12.		AND DIRECTORS	13.	. K digitalization	ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTO	RS IN 12	
TITLE	D	DELETE	1.1 TITLE				Change	Addition	
NAME	MILLER, LEONARD		1.2 NAME					ļ	
STREET ADDRESS			1.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	iT-ZIP			_		
TITLE	V	☐ DELETE	2.1 TITLE			<u> </u>	Change	Addition	
NAME	RUBIN, SHELLY		2.2 NAME		suite 300				
STREET ADDRESS	760 NW 107TH AVE		2.3 STRES	TADDRESS				`	
CITY-ST-ZIP	MIAMI FL 33172		2, 4 CITY-	ST-ZIP					
TITLE	T	☐ DELETE	3.1 TITLE				Change	Addition	
NAME	JORDAN, MARGARET		3.2 NAME		- ^			~	
STREET ADDRESS			3.3 STREE	TADDRESS	Suite 300				
CITY-\$T-ZIP	MIAMI_FL_33172		3.4. CITY-	ST-ZIP	_			_	
TITLE	DCEO	DELETE 4.1 T					Change	Addition	
NAME	SAIONTZ, STEVEN J.		4. 2 NAME		_ `_			_	
STREET ADDRESS		•	4.3 STREE	TADDRESS	Sur 214	سنسب			
CITY-ST-ZIP	MIAMI FL 33172		4.4 CITY-5	ST-ZIP				J	
TITLE	DC	☐ DELETE 5.1 TI					Change	Addition	
NAME	MILLER, STUART A.		5.2 NAME						
STREET ADDRESS	l		5.3 STREE	TADDRESS			•		
CITY-ST-ZIP	MIAMI FL	!	5.4 CITY-5	ST-ZIP					
TITLE	AS	15 SELETE	6.1 TITLE		AS		Change	Addition	
NAME	MCMICKLE, J. T.	•	6.2 NAME		AS PETA-GAY ARNO	11			
STREET ADDRESS		•	6.3 STREE	TADDRESS	PETA-GAY HRN	~ <i>TT</i>	_	_	
DIVICE HERVINGS	1 100 HTT 101 H1 ATE		64 CITY-9		· · · · · · · · · · · · · · · · · · ·	ت ۲۰۰۰	1.2.	ጥ <i>ፖ</i> ስ ነ	

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 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, with all other like empowered.

PFO MARGARET JORDAN, TREAS.