

# 2000 UNIFORM BUSINESS REPORT (UBR)

007281 A

<b>DOCUMENT # A96000000914</b>			
1. Entity Name <b>LEF/PALM-AIRE, LTD.</b>			
Principal Place of Business <b>2601 S. BAYSHORE DRIVE SUITE 300-A MIAMI FL 33133</b>		Mailing Address <b>ONE GREENWAY PLAZA, SUITE 850 HOUSTON TX 77046-0196</b>	
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.	
City & State		City & State	
Zip <b>33133-5413</b>	Country <b>USA</b>	Zip	Country <b>USA</b>
6. Name and Address of Current Registered Agent  <b>FRIEDMAN, DAVID A 2601 S. BAYSHORE DRIVE SUITE 300-A MIAMI FL 33133</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
9. Capital Contributions as Shown on record. <b>\$123,688.00</b>		10. Amount of Capital Contributions in FLORIDA to date.	
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 # NAME STREET ADDRESS CITY - ST - ZIP	<b>P95000020360 LEF/PALM-AIRE, INC. 848 BRICKEL AVENUE, SUITE 1120 MIAMI FL 33131</b>	STREET ADDRESS CITY - ST - ZIP	<b>2601 South Bayshore Drive, Suite 300-A Miami, Florida 33133-5413</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	<i>inf 2/3/00</i>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	<b>6000003152036--8 -02/29/00--01081--017 ****535.00 ****535.00</b>
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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			
<b>LEF/Palm-Aire, Inc., General Partner of LEF/Palm-Aire, Ltd.</b>			
<b>Sandra E. Ray, Secretary and Vice President</b>			
SIGNATURE: <i>[Signature]</i>		January 18, 2000 713-850-1850	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date Daytime Phone #	

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 FEB 14 AM 11:25



DO NOT WRITE IN THIS SPACE

CR2E003 (9/99)