2000 UNIFORM BUSINESS REPORT (UBR)

FILED A97000000326 May 02, 2000 8:00 am Secretary of State DOCUMENT # 1. Entity Name LID ASSOCIATES, LTD. Principal Place of Business Mailing Address C/O LOEB PARTNERS REALTY C/O LOEB PARTNERS REALTY 521 FIFTH AVENUE. SUITE 2300 521 FIFTH AVENUE. SUITE 2300 NEW YORK NY 10175 ILL BUCC NEW YORK NY 10175-2399 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-3931361 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSEN, LAWRENCE N Street Address (P.O. Box Number is Not Acceptable) 2925 AVENTURA BLVD., SUITE 308 AVENTURA FL 33180 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) 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$5,127,000.00 SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. ... as Shown on record. 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. GENERAL PARTNER INFORMATION 12. P97000011478 DOCUMENT # STREET ADDRESS LOEB INTERNATIONAL DRIVE, INC. NAME 521 FIFTH AVENUE, SUITE 2300 STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10175** CITY - ST - ZIP DOCUMENT # STREET ADDRESS NAAF STREET ADDRESS CITY-ST-ZIP CITY - ST - 716 DOCUMENT# ~~~*900003283099=~f5` STREET ADDRESS NAME - --06709700--01039--002 STREET ADDRESS CITY-ST-ZIP ****526.25 // ****526.25 CITY - ST - 7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZEP CITY - ST - ZIP DOCUMENT # STREET ADDRESS STREET_ADORESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 BY Lows Taternational Drive, Lee, G.P. DSTEVEN.D. GOLD 4/27/02 212-88

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