

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G45908

Entity Name
LIBERTY PROPERTIES INVESTMENT, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State
01-24-2000 90016 017 ***158.75

Principal Place of Business	Mailing Address
BLDG BISCAYNE BLVD FL 33137	5601 BLDG 5601 BISCAYNE BLVD MIAMI FL 33137-2634

Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State		
Zip	Country	Zip	Country

4. FEI Number	59-2307517	Applied For
		Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROSEN, STEVEN M. 5601 BISCAYNE BLVD. MIAMI FL 33137	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
PSD ROSEN, STEVEN M 5601 BISCAYNE BLVD MIAMI FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP
VP ROSEN, JENNIFER L 5601 BISCAYNE BOULEVARD MIAMI FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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	TITLE NAME STREET ADDRESS CITY-ST-ZIP
	TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 or supplemental 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 11 or Block 12 if changed from an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN M ROSEN, Pres 1/24/00 305 158 3100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #