

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009843

Entity Name: LEX PROPERTIES L.L.C.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

16375 NE 18TH AV
323
NORTH MIAMI BCH, FL 33162

Current Mailing Address:

16375 NE 18TH AV
323
NORTH MIAMI BCH, FL 33162

New Principal Place of Business:

290 NW 165TH STREET
P100
MIAMI, FL 33169

New Mailing Address:

290 NW 165TH STREET
P100
MIAMI, FL 33169

FEI Number: 75-3111431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTES, ALIX J ESQ.
5999 BISCAYNE BLVD
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MONTES, ALIX J
Address: 5999 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: FRANCOIS, ULYSSE
Address: 956 NW 167 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Delete
Name: LEX & ASSOCIATES COR, P
Address: 16375 NE 18TH AV, SUITE 323
City-St-Zip: N. MIAMI BCH, FL 33162

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: LEX & ASSOCIATES COR, P
Address: 290 NW 165TH STREET, SUITE P100
City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTHONY D BOX

MM

04/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date