

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000009217

1. Entity Name
LEF/NORTH MIAMI CITY CENTER, LLC

FILED
00 MAR 13 PM 3:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA
0025387

Principal Place of Business
2601 SOUTH BAYSHORE DRIVE, SUITE 300-A
MIAMI FL 33133

Mailing Address
ONE GREENWAY PLAZA, SUITE 850
HOUSTON TX 77046-0196

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip
33133-5413

Country
USA

Zip

Country
USA

4. FEI Number
65-0977018

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRIEDMAN, DAVID A
2601 SOUTH BAYSHORE DRIVE, SUITE 300-A
MIAMI FL 33133 - 5413

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
FRIEDMAN, LEONARD E
2601 SOUTH BAYSHORE DR., SUITE 300-A
MIAMI FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
One Greenway Plaza, Suite 850
Houston, Texas 77046-0196

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
FRIEDMAN, DAVID A
2601 SOUTH BAYSHORE DR., SUITE 300-A
MIAMI FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
Miami, Florida 33133-5413

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
9000003184009-4
-03/24/00--01124-014
*****55.00 *****55.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 managing member or manager of the limited liability company or receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

Leonard E. Friedman

January 18, 2000

713-850-1850

CR2E083 (9/99)