FILING FEE Amual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE  1 Name and Malling Address LDS ANGELES CA 90049  LBJ RRAITY HOLDINGS, LLC 148 SOUTH WESTGATE AVE. LOS ANGELES CA 90049  2 Principal Place of Business Surio, Apt. F. etc  2 Principal Place of Business Surio, Apt. F. etc  3 Date Organized or Qualified 3 State  3 Date of Last Report  CA  4 FERNamber  4 FERNamber  95 - 4603452  APT.  Name 95 - 4603452  APT.  Name 95 - 4603452  APT.  Name 13160 N.W. 43RD AVE.  OPA LOCKA FL 33054  Street Address (P.O. Box Number in Not Acceptable)  10. Time Managing Members/Managors  Business Street Address (P.O. Box Number in Not Acceptable)  AL JUN 2 9 1999.  11. (Chemically conflict the Chipations.)  AL JUN 2 9 1999.  11. (Chemically conflict the Chipations.)  AL JUN 2 9 1999.	LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS					SECRETARY OF STATE DIVISION OF CORPORATIONS  99 JUN 28 PH 4: 05			
Name and Malling Address of Climided Libelly Company						]			
LBS REALTY HOLDINGS, LIC  148 SOUTH WESTGATE AVE.  LOS ANGELES CA 90049  2 Principal Place of Business  2a. Making Address  3. Date Organized or Qualified  3a. Sinte of Formatin  01/30/1997  CA  4. FEI Number  2p  Country  3. Date of Last Report  04/13/1998  7. Name and Address of Current Registered Agent  8. Name and Address of New Registered AgentOffice  RRALY, BOB  13160 N. W. 43RD AVE.  OPA LOCKA FL 33054  Street Address (P.O. Book Number is Not Acceptable)  9. Pursuant to the provisions of Sections 608.416 and 608.506, Florida Statutes, the above named firmind lability company submits this statument for the puryose of its registered agent or both, in the State of Florida Such change was authorized by affirmative vote of a majority of the members thereby accept these parts of the provisions of Sections 608.416 and 608.506, Florida Statutes, the above named firmind lability company submits this statument for the puryose of its registered agent or both, in the State of Florida Such change was authorized by affirmative vote of a majority of the members thereby accept these parts of the provisions of Sections 608.416 and 608.506, Florida Statutes and authorized by affirmative vote of a majority of the members thereby accept these parts of the provisions of Sections 608.416 and 608.506, Florida Statutes and authorized by affirmative vote of a majority of the members thereby accept these parts of the provisions of Sections 608.416 and 608.506, Florida Statutes and 2p Code  MGRM BLIVAS, LARRY  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  OPA LOCKA FL  JUN 29 1999.  11 Ido hereby cently that the information supplied with this filing does not qualify for the exemption street in the date mode scale, that any name appoints in Block at attachment with an address.	1. Name	and Mailing Address				ĺ			
LOS ANGELES CA 90049  LOS ANGELES CA 90049  LOS ANGELES CA 90049  2 Principal Place of Business  2a. Mailing Address  2b. Mailing Address  3. Date Organized or Qualified 3a. State of Formation 1/30/1997  CA  Suife, Apt. F. etc.  4. FEI Number  3- Date of Lasi Report 04/13/1998  7. Name and Address of Current Registered Agent  RRALY, BOB 13160 N. W. 43RD AVE.  OPA LOCKA FL 33054  Striet Agit F. etc.  5. Date of Lasi Report 04/13/1998  7. Name and Address of Current Registered Agent  Name  Name  Street Address (P.O. Box Number is Not Acceptable)  Striet Address (P.O. Box Number is Not Acceptable)  Striet Address (P.O. Box Number is Not Acceptable)  FL  GRAPH F. etc.  Gray  FR  GRAPH F. etc.  Gray  FR  10. Title  Managing Members Managors  Business Street Address  Cdy, State and ZP, Code  MGRM  BLIVAS, LARRY  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  OPA LOCKA FL  13160 N. W. 43RD AVE.  OPA LOCKA FL  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  OPA LOCKA FL  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  OPA LOCKA FL  11 (do hereby centify that the information supplied with that liting does not qualify for the certage date in section 28th regal at the managing member of manifolded on this annual report is to an accurate and that my segmenter and the new person of the control of the section 28th regal at the managing member of manifolded on this annual report is to an accurate and that my segmenter and the new person of the managing member of manifolded on this annual report is to an accurate and that my segmenter and the time and code cath, real and managing member of manifolded on this annual report is to an accurate and that my segmenter and the time and code cath, real and managing member of manifolded on this annual report is to an accurate and that my segmenter as required by Chapter 608. Florids Statutes and that my name appears in Bloss to an accurate with an address.	148 SOUTH WESTGATE AVE.					148 SOUTH WESTGATE AVE.			
Surio, Apt. #, etc.    Surio, Apt. #, etc.									
Surie, Apt. #, etc.  City & State  7. Name and Address of Current Registered Agent  Name  Name  Name  Name  Name  Name  Name  Name  Name  Street Address of New Registered Agent/Office  RRALY, BOB  13160 N.W. 43RD AVE.  OPA LOCKA FL 33054  Surie, Apt. #, etc.  City  FL  Surie, Apt. #, etc.  City  FL  Surie, Apt. #, etc.  City  FR  Name  Street Address of New Registered Agent/Office  Name  Street Address of New Registered Agent/Office  RRALY, BOB  13160 N.W. 43RD AVE.  OPA LOCKA FL 33054  Surie, Apt. #, etc.  City  FR  Name	2 Princip	al Place of Business	2a. Mai	iling Address	<del></del>	3. Date Organiz	ed or Qualified	3a. State of Formation	
City & State    State	Suite, Apt. #, etc. Suite			Apt. #, etc.		<b>1</b> '_ '		CA	
7. Name and Address of Current Registered Agent  7. Name and Address of Current Registered Agent  7. Name and Address of Current Registered Agent  8. Name and Address of New Registered Agent/Office  RRALY, BOB  13160 N.W. 43RD AVE.  OPA LOCKA FL 33054  Suite, Apt #, otc				v & State				Applied For	
7. Name and Address of Current Registered Agent  7. Name and Address of Current Registered Agent  8. Name and Address of New Registered Agent/Office  KRALY, BOB  13160 N.W. 43RD AVE.  OPA LOCKA FL 33054  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  6. Pursuant to the provisions of Sections 608.416 and 608 508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of its registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Hereby accept the ap as registered agent, and accept the obligations.  SIGNATURE    Pursuant to the provisions of Sections 608.416 and 608 508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of its registered agent, and accept the obligations.  SIGNATURE    Pursuant to the provisions of Sections 608.416 and 608 508, Florida Statutes, the above-named limited liability company submits this statement tor the purpose of its registered agent, and accept the obligations.  SIGNATURE    Pursuant to the provisions of Sections 608.416 and 608 508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of the registered agent, and accept the apast section 19 purpose of the registered agent, and accept the apast section 19 purpose of the registered agent, and accept the apast section 19 purpose of the registered agent and purpose of the registered agent and purpose of the registered agent at a final purpose of the registered agent and purpose of the registered agent agent and purpose of the registered agent agent agent agent a								Not Applica  6. Certificate of Status Desire	
RRALY, BOB 13160 N.W. 43RD AVE. OPA LOCKA FL 33054  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  Gry/U2/93—01036—  Oity  FFL  9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of its registered digent, or both, in the State of Frorida Such change was authorized by affirmative vote of a majority of the members. Thereby accept the ap as registered agent, and accept the obligations.  SIGNATURE  (Registered Agent Agent Accepts to Approximate)  ROTE  Managing Members/Managers  Business Street Address  City, State and Zip Code  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  MGRM BLIVAS, JULIE  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  MGRM KRALY, BOB  13160 N.W. 43RD AVE.  OPA LOCKA FL  AL JUN 29 1999,  11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (1). Florida Statutes. If further certify that the in indicated on this annual report is true and accurate and that mry signature shall have the same legal effect as if made under cash, that I am a managing member or manifold statutes. The company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes, and that mry name appears in Block to attachment with an address.	Zip	Country	Zip	Coun	itry	04/13/1	998	S8 75 Additional Fee Required	
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Suife, Api, *, etc.		7. Name and Address of C	urrent Registere	d Agent		Name and Addres	s of New Regis	tered Agent/Office	
Pursuant to the provisions of Sections 608.416 and 608.508. Florida Statutes, the above-named limited liability company submits this statement for the purpose of its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the ap as registered agent, and accept the obligations.  SIGNATURE  The patient Agent Accepts by Affective and the purpose of the purpose o	13160 N.W. 43RD AVE.								
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10. Title Managing Members/Managers Business Street Address City, State and Zip Code  MGRM BLIVAS, LARRY 148 SOUTH WESTGATE AVE. LOS ANGELES CA  MGRM BLIVAS, JULIE 148 SOUTH WESTGATE AVE. LOS ANGELES CA  MGRM KRALY, BOB 13160 N.W. 43RD AVE. OPA LOCKA FL  148 SOUTH WESTGATE AVE. LOS ANGELES CA  MGR KRALY, BOB 13160 N.W. 43RD AVE. If JUN 2 9 1999.	its register	ed office or registered agent, or bot	h, in the State of Fig				ubmits this state		
MGRM BLIVAS, LARRY  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  MGRM BLIVAS, JULIE  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  MGR KRALY, BOB  13160 N.W. 43RD AVE.  OPA LOCKA FL   11 Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. Iffurther certify that the indicated on this annual 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 manalimited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10 attachment with an address.	SIGNATU	RE	preside a Apparatoreal)	(NOTE Registered Agent signation	re received when yet status		DATE		
MGRM BLIVAS, JULIE  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  OPA LOCKA FL  13160 N.W. 43RD AVE.  OPA LOCKA FL  1. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes and that my signature shall have the same legal effect as if made under oath; that I am a managing member or mana limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Blosk 16 attachment with an address.				<u> </u>			City, State and Zip Code		
MGRM BLIVAS, JULIE  148 SOUTH WESTGATE AVE.  LOS ANGELES CA  OPA LOCKA FL  13160 N.W. 43RD AVE.  OPA LOCKA FL  1. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes and that my signature shall have the same legal effect as if made under oath; that I am a managing member or mana limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Blosk 16 attachment with an address.	MGRM	BLIVAS, LARRY	148 SOUTH WESTGATE AVE.		LAVE.	LOS AN	IGELES CA		
MGR KRALY, BOB  13160 N.W. 43RD AVE.  OPA LOCKA FL  JUN 29 1999.  11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes. If urther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes are a supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes are a supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutes are a supplied with this filing does not qualify for the exemption stated in Sect			{						
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SIGNATURE; fally of W2	indicated of limited liab	on this annual report is true and acc oility company or the receiver or tru	curate and that my	signature shall have the	same legal effect as	if made under oalf	i; that I am a mar	naging member or manager of t	