

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90148 006 ***150.00

DOCUMENT # P00000028218

1. Entity Name
LNR 2000 FUND I MM, INC.

Principal Place of Business 760 N.W. 107TH AVENUE SUITE 300 MIAMI FL 33172	Mailing Address 760 N.W. 107TH AVENUE SUITE 300 MIAMI FL 33172
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-1001889** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUBIN, SHELLY
 760 N.W. 107TH AVENUE
 SUITE 300
 MIAMI FL 33172**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

9. 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, 2001 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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D MILLER, LEONARD 700 N.W. 107TH AVENUE MIAMI FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D SAIONTZ, STEVEN J 760 N.W. 107TH AVENUE SUITE 300 MIAMI FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D MILLER, STUART A 700 N.W. 107TH AVENUE MIAMI FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	AC Lieberman, Arthur J. 760 N.W. 107 AVE, Suite 300 MIAMI, FL 33172
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	S Dickstein, ZENA 760 N.W. 107 AVE, Suite 300 MIAMI, FL 33172
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	VP Rubin, Shelly 760 N.W. 107 AVE, Suite 300 MIAMI, FL 33172

13. 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Arthur J. Lieberman** Date **4/19/01** Daytime Phone # **305/485-2000**

CR2E034 (10/00)