FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Jul 16, 2002 8:00 am Secretary of State

DOCU 1. Entity Na	JMENT # PO 00000 LG Propertie	248/0 TONY Grier			02 90360 029 ***158.75
	DO NOT WRITE	IN THIS SPA	CE		121021
2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. City & State City & State			Mue:BLvd	DO NOT WRITE IN THIS SPACE	
MiAmi MiAmi		MiAmi Zip 22 - Co	ountry	4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional	
231	32 USA	33152	USA	<u> </u>	Fee Required
્રા હ	4		7. Name and Address of Current Registered Agent Name		
	DO NOT WE	RITE	Street Address	any Grier	
IN THIS SPACE			Street Address (P.O. Box : Imber is Not Acceptable)		
IN THIS SPACE		AVL.	601 Biscayne Blud.		
			I Cit∨ ∡	'Am i	Zip Code
8. The above	e named entity submits this statement for the	he purpose of changing its regist	tered office or regist	tered agent, or both, in the State of F	33/32
	1.4 Y.	-		and a second of second of the second of the	i i
SIGNATURE	Signature, typed or printed have of heatstered agent and	title if applicable (AVOTE D			5/16/02
9. This corn	oration is eligible to satisfy its Intangible	January 1 - May 1	ered Agent signature requir	red when reinstating)	PATE /
Tax filing (See crite	requirement and elects to do so.	After May 1, Fe Amended UBF Make Check Payable to	e is \$550.00 R is \$61.25	10. Election Campaign F Trust Fund Contributi	
11.	OFFICERS AND DI				
NAME	President		TLE Ame		
STREET ADDRESS	TONY Grier G	i i	REET ADDRESS	Mrse _{1 + * *}	
CITY-ST-ZIP	601 BISCHYNE B	Lvd cr	TY-ST-ZIP		, [
TITLE NAME	MiAMI, FL 33138		TLE		
STREET ADDRESS			AME REET ADDRESS		
CITY-ST-ZIP		Cn	TY-ST-ZIP	· 7	
TITLE	Director: James (323 North Chicago, 2	Grier Eson III	TLE		
NAME Street Address	32.3 North	WACKET Dr. NA	ME		,
CITY-ST-ZIP	Chicago, I	57 606 0 6 SII	REET ADDRESS	DO-NOT	WRITE
TITLE	Director! Sophia Po				
NAME STREET ADDRESS	2521 Su	74th Aug	ME .	IN THIS	SPACE
STREET ADDRESS CITY-ST-ZIP	Director! Sophia Pe 2521 SW Miami, FL	33/VV	REET ADDRESS		,
TITLE	7,10		Y-ST-ZIP		
NAME		TITI NAN		4	**************************************
STREET ADDRESS			REET ADDRESS		
CITY-ST-ZIP		Cirr	Y-ST-ZIP		
TITLE NAME	•	TITL	i	•	
STREET ADDRESS		NAM STR	ME EET ADDRESS		ĺ
CITY-ST-ZIP	_		Y-ST-ZIP		

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 thistee improved to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all the life empty execute.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16/02 305-759-8358

· ~*	FOR PROFIT CORPORAT INIFORM BUSINESS REPORT	ION ATPANAMA
1		17/02/
2	LG Properties, INC	This ANNUAL I Also
	DO NOT WRITE IN THIS S	P Report 15 MAde Changes 1
2. Principal 6 C Suite Ap		Si my Address chance or your Address
City & Sta	MiAmi Country Zio	To Send Now 121 the White out.
33/	32 <u>ÚSA</u> 33132	at \$150.00 hukr
	DO NOT WRITE IN THIS SPACE	Street Address (P.O. Box 7 unber is Not Acceptable)
		601 Biscaque BLVd. City Miami FL 7io Code 33/32
8. The above	Anthon Line	ts registered office or registered agent, or both, in the State of Florida. STE: Registered Agent signature required when reinstating)
Tax filing	requirement and elects to do so.	May 1: Fee is \$150.00 y 1; Fee is \$550.00 10. Election Campaign Financing \$5.00 May Be d UBR is \$61.25 Trust Fund Contribution. Added to Fees
11.	OFFICERS AND DIRECTORS	The state of the s
NAME STREET ADDRESS CITY-ST-ZIP	President Tony Grier 601 Bischyne Blud	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS	MiANI, FL 33132	TITLE NAME
CITY-ST-ZIP	0:	STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS	Director: JAMES Grier ESB 323 North WACKER Dr. Chicago, IL 60606	TITUE NAME STREET ADDRESS
CITY-ST-ZIP TITLE NAME	Director! Sophia Perez 2521 SW 74th Aug Miami, FL 33144	CITY-ST-ZIP DO NOT WRITE INTHE SPACE
STREET ADDRESS CITY-ST-ZIP	MiAMI, FL 33144	STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADORESS		TITLE NAME STREET ADDRESS
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		CITY-ST-ZIP.
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	CHY-ST-ZIP. THLE NAME STREET ADDRESS CHY-ST-ZIP.

SIGNATURE:

5/16/02 305-759-8358