2001 UNIFORM BUSINESS REPORT (UBR)

Apr 18, 2001 8:00 am Secretary of State DOCUMENT # **P95000020362** 1. Entity Name LEF/DELRAY MALL, INC. 04-18-2001 90107 007 ***150.00 Principal Place of Business Mailing Address 2601 S BAYSHORE DR ONE GREENWAY PLAZA MIAMI FL 33133-5413 STE. 850 April 1 Republic HOUSTON TX 77046-0196 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0585895 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRIEDMAN, DAVID A Street Address (P.O. Box Number is Not Acceptable) 2601 S BAYSHORE DR STE 300-A MIAMI FL 33133-5413 Zip Code FL 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 \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FRIEDMAN, LEONARD E NAME NAME ONE GREENWAY PLAZA, STE. 850 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOUSTON TX 77046-0196 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME FRIEDMAN, DAVID A NAME STREET ADDRESS 2601 SOUTH BAYSHORE DRIVE, SUITE 300-A STREET ADDRESS CITY-ST-ZIP MIAMI FL 33133-5413 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME RAY, SANDRA E NAME STREET ADDRESS ONE GREENWAY PLAZA, STE 850 STREET ADDRESS CITY-ST-ZIP HOUSTON TX 77046-0196 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition SWINKE, DAVID L. NAME NAME STREET ADDRESS ONE GREENWAY PLAZA, STE 850 STREET ADDRESS CITY-ST-ZIP HOUSTON TX 77046-0196 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition THIBAUT, HOWARD W NAME NAME STREET ADDRESS ONE GREENWAY PLAZA, STE. 850 STREET ADDRESS CITY-ST-ZIP HOUSTON TX 77046-0196 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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.

Sandra E. Ray, Secretary and Vice President

SIGNATURE: ____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 21,2001

713-850-1850

Daytime Phone #