

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90127 026 ***150.00

DOCUMENT # P97000062814

1. Entity Name
LAS PROPERTIES INC.



Principal Place of Business
LEONARD BLOOM PA
201 BISCAYNE BLVD STE 3000
MIAMI, FL 33131

Mailing Address
LOEB, BLOCK & PARTNERS LLP
505 PARK AVE 9TH FLOOR
NEW YORK, NY 10022

14015747



2. Principal Place of Business
Corporation Service Company

3. Mailing Address

Suite, Apt. #, etc.
1201 Hays Street

Suite, Apt. #, etc.

City & State
Tallahassee, FL

City & State

Zip Country
32301

Zip Country

04082005 Chg-P CR2E034 (10/03)

4. FEI Number
13-3975206

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES, INC.
201 SOUTH BISCAYNE BLVD STE 3000
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City State Zip Code
Tallahassee FL 32301

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. I am familiar with, and accept the obligations of registered agent.

Laura R. Dunlap
as its agent

8/4/05

SIGNATURE *Laura R. Dunlap*
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
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
BERKE, HOWARD ☐ Delete
505 PARK AVE 9TH FLOOR
NEW YORK, NY 10022

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
SELZER, HERBERT ☐ Delete
505 PARK AVE 9TH FLOOR
NEW YORK, NY 10022

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Herbert M. Selzer

4/25/05