FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000101122 (4) LEF/NORTHRIDGE, INC.

Country

Principal Place of Business

Mailing Address

26

27

28 Zip

ATUDE Sandra E. Ravi (Corn. Sec. 1447) Review

848 BRICKELL AVENUE SUITE 1120 MIAMI FL 33131

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

23

ONE GREENWAY PLAZA SUITE 850 HOUSTON TX 77046-0102

2a. Malting Address

City & State

Suite, Apt. #, etc.

FILED Apr 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

02-12-98

713-850-1850

 \mathbf{X}

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

3. Date Incorporated or Qualified

5. Certificate of Status Desired

 Election Campaign Financing Trust Fund Contribution

12/01/1997 FEI Number 65-0798249

24	25	29	30	<u> </u>		Personal Property Tax due June 30. Yes No	
	9, Name and Addr	ress of Current Registered A	gent			10. Name and Address of New Registered Agent	
FRIEDMAN, DAVID A 81 Name							
848 BRICKELL AVENUE SUITE 1120 MIAMI FL 33131				82	82 Street Address (P.O. Box Number is Not Acceptable)		
				1			
****	**** • • • • • • • • • • • • • • • • •			63			
				84	City	85 Zip Code	
					City	FL S Z D C C C C C C C C C	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed nar	me of registered agent and title if applicat	ole (NOTE: F	egistered Age	nt signature	rs required when reinstating) DATE	
12.		OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		DELETE	1.1 TITLE		DP Mange Addition	
NAME	FRIEDMAN, LEO	NARD E		1.2 NAME			
STREET ADDRESS	848 BRICKELL A	VENUE SUITE 1120		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33131			1.4 C(TY-5	T-ZIP		
TITLE			DELETE	2.1 TITLE		V Change Addition	
NAME				2.2 NAME		Friedman, David A.	
STREET ADDRESS				2.3 STREET	ADDRESS		
CITY-ST-ZIP				2.4 CITY-	ST-ZIP	Miami, FL 33131-2943	
TITLE			☐ DELETE	3.1 TITLE		S Change 🙀 Addition	
NAME				3.2 NAME		Ray, Sandra E.	
STREET ADORESS				3.3 STREET	ADDRESS		
CITY-ST-ZIP				3.4. CITY-	ST-ZIP	Houston, TX 77046-0102	
TITLE			DELETE	4.1 TITLE		T Change 🙀 Addition	
NAME				4. 2 NAME		Swinke, David L.	
STREET ADDRESS				4.3 STREET	ADDRESS	and discounting states, said out	
CITY-ST-ZIP				4.4 CITY-5	T-ZIP	Houston, TX 77046-0102	
TITLE			☐ DELETE	5.1 TITLE		Change Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP			T on ere	5.4 CITY - 5	T - ZIP	Change L Addition	
TITLE			☐ DELETE	6.1 TITLE		Change L Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET			
CHTY+ST-ZIP		A STATE OF THE STA		6.4 CITY-5		ted in Continue \$10.07/29/i) Elected Creation I further portify that the information	
14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.							

Country