

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2000 8:00 am
Secretary of State

01-19-2000 90318 032 ***150.00

DOCUMENT # V01531

1. Entity Name

LIBERTY PROPERTIES MANAGEMENT, INC.

Principal Place of Business

Mailing Address

13899 BISCAYNE BLVD. STE 312
 NORTH MIAMI BEACH FL 33181
 US

13899 BISCAYNE BLVD. STE 312
 NORTH MIAMI BEACH FL 33181-1652
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0300590

Applied For

Not Applicable

Zip

Country

Zip

Country

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

~~CATLIN, H. JAMES, JR.~~
~~169 EAST FLAGLER STREET~~
~~SUITE #1700~~
~~MIAMI FL 33121~~

Name **Glen Waldman**

Street Address (P.O. Box Number is Not Acceptable)

1401 Brickell Ave

Suite 700

City **Miami**

FL

Zip Code **33131**

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

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, 2000 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

TITLE **PS** Delete
 NAME **LUIS, JACQUELINE**
 STREET ADDRESS **20001 BISCAYNE BLVD.**
 CITY-ST-ZIP **MIAMI FL**

TITLE Change Addition
 NAME
 STREET ADDRESS **13899 Biscayne Blvd-#312**
 CITY-ST-ZIP **No. Miami Beach, FL 33181**

TITLE **VT** Delete
 NAME **DOLGOFF, LOIS**
 STREET ADDRESS **20001 BISCAYNE BLVD.**
 CITY-ST-ZIP **MIAMI FL**

TITLE Change Addition
 NAME
 STREET ADDRESS **13899 Biscayne Blvd-#312**
 CITY-ST-ZIP **No. Miami Beach, FL 33181**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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TITLE Change Addition
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 STREET ADDRESS
 CITY-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 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:

Jacqueline Luis
 SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jacqueline Luis

1-12-2000

Date

Daytime Phone #

(305) 702-6425

CR2E034 (9/99)