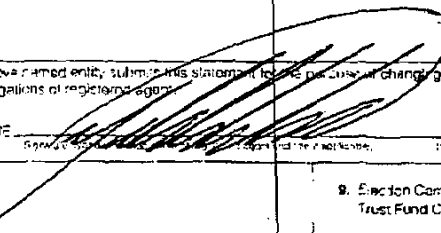
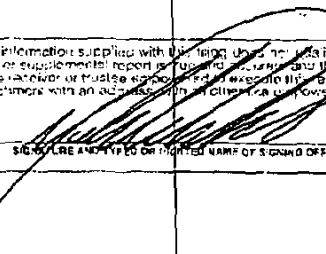


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

07 MAY 18 AM 10:45

STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000101929			
1. Entity Name SHELMAR REAL ESTATE HOLDINGS II, INC.			
Principal Place of Business 9350 S DIXIE HWY STE 1500 MIAMI, FL 33156		Mailing Address 9350 S DIXIE HWY STE 1500 MIAMI, FL 33156	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number APPLIED FOR		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SEGREDO, FRANK J ESQ. 9350 S DIXIE HWY STE 1500 MIAMI, FL 33156		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement to the Department of Banking and Finance of the State of Florida, and accepts the obligations of registered agent.			
SIGNATURE  DATE			
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			
TITLE	D	☐ Delete	
NAME	ROSENTHAL, YANKEL A		
STREET ADDRESS	9350 S DIXIE HWY STE 1500		
CITY-STATE-ZIP	MIAMI, FL 33156		
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
12. The entity certifies that the information supplied with this report does not violate the provisions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report or filing of a change and that my signature as I have the same legal effect as I made under oath; that I am an officer or director of the corporation or the receiver or trustee appointed or elected to the office as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 as changed or on an attachment with an affidavit in compliance with the law.			
SIGNATURE:  DATE			
SIGNATURE AND TITLE OF SIGNED OFFICER OR DIRECTOR			