


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 31, 2006 8:00 am
Secretary of State

07-31-2006 90005 050 ***150.00

DOCUMENT # P05000143119

1. Entity Name
BERAJA INVESTMENTS II, INC.



Principal Place of Business
**2550 DOUGLAS RD
FIRST FLOOR
CORAL GABLES, FL 33134-6126**

Mailing Address
**2550 DOUGLAS RD
FIRST FLOOR
CORAL GABLES, FL 33134-6126**

50023501



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

07062006 Chg-P CR2E034 (11/05)

4. FEI Number
20-3751559

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**LEVIN, STANTON G ESQ
% STANTON G. LEVIN, P.A.
1570 MADRUGA AVE - STE 311
CORAL GABLES, FL 33146**

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 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BERAJA, ISIDORO	
STREET ADDRESS	2550 DOUGLAS RD - FIRST FLOOR	
CITY-ST-ZIP	CORAL GABLES, FL 331346126	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERAJA, MATILDE	
STREET ADDRESS	2550 DOUGLAS RD - FIRST FLOOR	
CITY-ST-ZIP	CORAL GABLES, FL 331346126	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERAJA, ROBERTO	
STREET ADDRESS	2550 DOUGLAS RD - FIRST FLOOR	
CITY-ST-ZIP	CORAL GABLES, FL 331346126	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERAJA, VICTOR	
STREET ADDRESS	2550 DOUGLAS RD - FIRST FLOOR	
CITY-ST-ZIP	CORAL GABLES, FL 331346126	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERAJA, ESTHER B	
STREET ADDRESS	2550 DOUGLAS RD - FIRST FLOOR	
CITY-ST-ZIP	CORAL GABLES, FL 331346126	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Isidoro Beraja* Date: 7/27/06 Daytime Phone #: (305) 307-1206

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR