

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143119

FILED  
Feb 10, 2009  
Secretary of State

Entity Name: BERAJA INVESTMENTS II, INC.

## Current Principal Place of Business:

2550 DOUGLAS RD  
SUITE 301  
CORAL GABLES, FL 331346126

## New Principal Place of Business:

## Current Mailing Address:

2550 DOUGLAS RD  
SUITE 301  
CORAL GABLES, FL 331346126

## New Mailing Address:

FEI Number: 20-3751559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## 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 US

## Name and Address of New Registered Agent:

LEVIN, STANTON G ESQ  
9485 SUNSET DRIVE  
STE A-258  
MIAMI, FL 33173 US

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:

Electronic Signature of Registered Agent

02/10/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BERAJA, ISIDORO  
Address: 2550 DOUGLAS RD SUITE 301  
City-St-Zip: CORAL GABLES, FL 331346126

Title: D ( ) Delete  
Name: BERAJA, MATILDE  
Address: 2550 DOUGLAS RD SUITE 301  
City-St-Zip: CORAL GABLES, FL 331346126

Title: D ( ) Delete  
Name: BERAJA, ROBERTO  
Address: 2550 DOUGLAS RD SUITE 301  
City-St-Zip: CORAL GABLES, FL 331346126

Title: D ( ) Delete  
Name: BERAJA, VICTOR  
Address: 2550 DOUGLAS RD SUITE 301  
City-St-Zip: CORAL GABLES, FL 331346126

Title: D ( ) Delete  
Name: BERAJA, ESTHER B  
Address: 2550 DOUGLAS RD SUITE 301  
City-St-Zip: CORAL GABLES, FL 331346126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATILDE BERAJA

Electronic Signature of Signing Officer or Director

D

02/10/2009

Date