## **2006 FOR PROFIT CORPORATION** ANNUAL REPORT

Gradeline Broste

SIGNATURE:

## Apr 03, 2006 8:00 am Secretary of State **DOCUMENT #463234** 03-22-2006 90030 032 \*\*\*150.00 1. Entity Name CONCEPT II, INC. Principal Place of Business Mailing Address 4601 N. DIXIE HWY. 4601 N. DEXIE HWY. 66008172 BOCA RATON, FL 33431 BOCA RATON, FL 33431 US 01172006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1573258 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRONTE, MADELINE DO NOT WRITE 1901 N OCEAN BLVD FORT LAUDERDALE, FL 33305 IN THIS SPACE 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 re 3.26.06 SIGNATURE (NOTE: Registered Agent eigneture required when retretating) \$5.00 May Bo 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS mn e`-' BRONTE, MADELINE B NAME STREET ADDRESS 1901 N OCEAN BLVD CITY-ST-ZP FORT LAUDERDALE, FL 33305 MLE HAME STREET ADDRESS CITY-ST-71P TITLE MAME STREET ADDRESS DO NOT WRITE MLE IN THIS SPACE MALE STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 affect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, 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.

3.26.06

FILED