

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90022 047 ****61.25

DOCUMENT # 721839

1. Entity Name
EMBASSY TOWER II, INC.



Principal Place of Business
2715 N. OCEAN BLVD.
FT LAUDERDALE, FL 33308

Mailing Address
2715 N. OCEAN BLVD.
FT LAUDERDALE, FL 33308

50009528



2. Principal Place of Business

3. Mailing Address

03282006 Chg-NP CR2E037 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number
59-1457703

Applied For
 Not Applicable

City & State

City & State

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

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KATZMAN & KORR, P.A.
1501 NW 49TH STREET
SUITE 202
FORT LAUDERDALE, FL 33309

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** Delete
 NAME **LEBLEIN, LAWRENCE A**
 STREET ADDRESS **2715 N OCEAN BLVD. #15A**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33308**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** Delete
 NAME **VOGEL, SAMRA**
 STREET ADDRESS **2715 N OCEAN BLVD., #2C**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33308**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **QUESADA, MAURICIO**
 STREET ADDRESS **2715 N OCEAN BLVD., #6E**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33308**

TITLE Change Addition
 NAME **ELISIO MERCADO**
 STREET ADDRESS **2715 N. OCEAN BLD. # 15B**
 CITY-ST-ZIP **FT. LAUDERDALE, FL. 33308**

TITLE **T** Delete
 NAME **WOOD, JAMES**
 STREET ADDRESS **2715 N OCEAN BLVD., #4-D**
 CITY-ST-ZIP **FT LAUDERDALE, FL 33308**

TITLE Change Addition
 NAME **DIRECTOR**
 STREET ADDRESS **ROBERT QUESADA**
 CITY-ST-ZIP **2715 N. OCEAN BLD. #PH-D**
FT. LAUDERDALE, FL. 33308

TITLE **SEC** Delete
 NAME **RENNIA, ROSEMARIE**
 STREET ADDRESS **2715 N OCEAN BLVD #12-D**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33308**

TITLE Change Addition
 NAME **DIRECTOR**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **SIDES, EUGENE**
 STREET ADDRESS **2715 N OCEAN BLVD. #12F**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33308**

TITLE Change Addition
 NAME **SECRETARY**
 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 617, 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: *Lawrence A. Lieblein* **LAWRENCE A. LIEBLEIN** **954-**
PRESIDENT **3128/06** **564-2166**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #