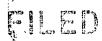
2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

STAPLE CHECK HERE

SIGNATURE:



DOCUMENT # A0300000060			04 APR 30 PH 12: 25
1. Entity Name			SECRETARY OF STATE
NRPII PARTNERS, LLLP			TALLAHASSEE, FLORIDA
Principal Place of Business M	Mailing Address	. <u> </u>	
115 N.W. 167TH STREET, #300 115 N.W. 167TH STREET, #300 NORTH MIAMI BEACH FL 33169 NORTH MIAMI BEACH FL 33169			
		00.00	(1540) (bil bolde liki 2011 4011 80)) beki bolu beli balik bili beki bili beki bili bekidi bi ibbi
2. Principal Place of Business 3.	Mailing Address		
one SE 3rd Avenue	Sui One SE 3rd Av	enue	MOORE CR2E003 (11/03)
City & Suite 3100 Miami, FL 33131	Suite 3100 City Miami, FL 331	31	4. FEI Number Applied For
	Zip		74-308/1/10 Not Applicable
			5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Regis	stered Agent	Name	7. Name and Address of New Registered Agent
TRACY, GRANVIL M	-		
1 15-N:W: 167TH-STREET, #3 00 NORTH-MIAMI-BEACH-EL-32169			One SE 3rd Avenue Suite 3100
John Trivia			_ Miami, FL 33131
		City	FL Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered office or registered agent.			
SIGNATURE ————————————————————————————————————			
9. Capital Contributions \$1,000.00 10. Amount of Capital Contributions 11 MAKE CHECK PAYABLE TO FLE DEPT. OF STA			
as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
NOTE: General Partners MAY NO	ndment must be filed to change a general partner.		
12. GENERAL PARTNER INFO		13.	ADDRESS CHANGES ONLY
NAME NRPH SPE GP II, LLC		STREET ADDRESS	One SE 3rd Avenue
STREET ADDRESS 115 N.W. 167TH STREET, #300 CITY-ST-ZIP NORTH MIAMI BEACH FL 33169		CITY-ST-ZIP	Suite 3100 Miami, FL 33131
DOCUMENT #		STREET ADDRESS	Wildill, I L 33131
NAME STREET ADDRESS	ľ	STILET ADDITESS	
CITY-ST-ZIP	C	CITY-ST-ZIP	
DOCUMENT # NAME	<u> </u>	STREET ADDRESS	200036482742 05/14/0401060013 **141.25
STREET ADDRESS			U3/14/04==01060==013 **141.25
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME	2	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP DOCUMENT #			
NAME	S	STREET ADDRESS	_
STREET ADDRESS CITY-ST-ZIP	C	CITY-ST-ZIP	0
DOCUMENT # NAME	S	STREET ADDRESS	NAN
STREET ADDRESS CITY-ST-ZIP	C	City-St-ZIP	<i>/ V</i>
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that any signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes			