

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 APR -7 AM 10:38

DOCUMENT # A03000001580 1. Entity Name MARKS-FRIEDMAN LIMITED II					
Principal Place of Business 7800 TALAVERA PLACE DELRAY BEACH, FL 33446			Mailing Address 7800 TALAVERA PLACE DELRAY BEACH, FL 33446		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 01242006 Chg-LP CR2E003 (11/05) 20-0274457	
Zip Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent REDGRAVE & TURNER LLP 120 EAST PALMETTO PARK ROAD, SUITE 450 BOCA RATON, FL 33432				7. Name and Address of New Registered Agent Name Redgrave & Rosenthal LLP Street Address (P.O. Box Number is Not Acceptable) 120 E. Palmetto Park Blvd. Suite 450 City Boca Raton FL Zip Code 33434	
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 <u>Shelley Wald Schwartz</u> DATE <u>1/24/06</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # F03000004778 NAME LOUMAR MANAGEMENT CORP. STREET ADDRESS 7800 TALAVERA PLACE CITY-ST-ZIP DELRAY BEACH, FL 33446			STREET ADDRESS CITY-ST-ZIP <div style="text-align: center; border: 1px solid black; padding: 5px;"> 500070466395 04/14/06--01061--016 **500.00 </div>		
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14. 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 is true and accurate and that my 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.					
SIGNATURE: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>				3-21-06 9089281733 <small>Date Daytime Phone #</small>	

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