


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # A32213			
1. Entity Name M & M MAISON II, LTD.			
Principal Place of Business URBAN LEAGUE OF GREATER MIAMI 8500 N.W. 25TH AVENUE MIAMI, FL 33147		Mailing Address 8500 N.W. 25TH AVENUE MIAMI, FL 33147	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FAIR, TALMADGE W GMUL, INC. 8500 N.W. 25TH AVENUE MIAMI, FL 33147		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 _____		DATE _____	



02042008 Chg-LP CR2E003 (12/06)

4. FEI Number
65-0294243

Applied For	
Not Applicable	


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

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 #	S89235	STREET ADDRESS	
NAME	GMUL, INC.	CITY-ST-ZIP	
STREET ADDRESS	8500 N.W. 25TH AVE.		
CITY-ST-ZIP	MIAMI, FL 33147		
DOCUMENT #	S83636	STREET ADDRESS	000000831361
NAME	GMN AFFD HSG PTNR II, INC	CITY-ST-ZIP	02/27/08-80015-017 508.75
STREET ADDRESS	1460 BRICKELL AVE.		
CITY-ST-ZIP	MIAMI, FL 33147		
DOCUMENT #	714512	STREET ADDRESS	
NAME	THE URBAN LEAGUE OF GREATER MIAMI, INC.	CITY-ST-ZIP	
STREET ADDRESS	8500 NW 25TH AVENUE		
CITY-ST-ZIP	MIAMI, FL 33147		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

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: 

02/06/08 305/696-4450

DUPLICATE VALUE HERE