


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

DOCUMENT # A9800001301		
1. Entity Name STIRLING APARTMENTS II, LTD.		
Principal Place of Business 1130 WASHINGTON AVENUE, 4TH FLOOR MIAMI BEACH FL 33139		Mailing Address 1130 WASHINGTON AVENUE, 4TH FLOOR MIAMI BEACH FL 33139
2. Principal Place of Business 1130 Kennedy Cswy. Suite, Apt. #, etc. #505 City & State N. Bay Village, FL Zip 33141		3. Mailing Address 1130 Kennedy Cswy. Suite, Apt. #, etc. #505 City & State N. Bay Village, FL Zip 33141

FILED

04 MAY -4 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



MOORE CR2E003 (11/03)

4. FEI Number 65-0876181		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ROJO, FRANCISCO C/O STIRLING APARTMENTS II, INC. 1130 WASHINGTON AVENUE, 4TH FLOOR MIAMI BEACH FL 33139		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1130 Kennedy Causeway Suite #505 City N. Bay Village FL Zip Code 33141	
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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 _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$2,847,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 # P98000046780	NAME STIRLING APARTMENTS II, INC.	STREET ADDRESS 1130 Kennedy Causeway, #505	
STREET ADDRESS 1130 WASHINGTON AVENUE, 4TH FLOOR		CITY-ST-ZIP N. Bay Village FL 33141	
CITY-ST-ZIP MIAMI BEACH FL 33139			
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CITY-ST-ZIP			

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 stated 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 receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **FRANCISCO ROJO** DATE: **4/21/04** EXT: **103**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

STAPLE CHECK HERE