
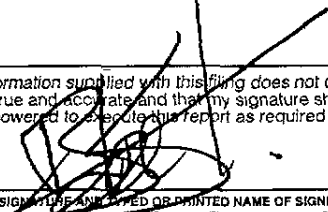


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
Apr 27, 2005 08:00 AM
Secretary of State**

DOCUMENT # A99000001737					
1. Entity Name AVENTURA LAND HOLDING II, LTD.					
Principal Place of Business 321 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441			Mailing Address 321 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		03082005 Chg-LP CR2E003 (10/03)	
Zip		Country		4. FEI Number 65-0938374	
				Applied For Not Applicable	
6. Name and Address of Current Registered Agent			5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
STOTZER, TED 321 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		FL
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$0.00			10. Amount of Capital Contributions in FLORIDA to date.		
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 #	F01000006127		STREET ADDRESS		
NAME	AVENTURA LAND HOLDING II (DEL), INC.		CITY-ST-ZIP	U00000833392	
STREET ADDRESS	321 E. HILLSBORO BLVD.			04/27/05-80003-014 150.00	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
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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 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 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: 			Date: 4/15/05		Daytime Phone #: 954 418-0202
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					



STAPLE CHECK HERE