2006 LIMITED PARTNERSHIP ANNUAL REPORT

2000	1.5	NERSHIP ANNUA y May 1, 2006	4L N	EFORT		As The			
1. Entity Nam	MENT # B05000 etners II, L.P.	000166				TOO NOR. OF PH 1: 06			
Principal Place of Business PIER 1, BAY 1 SAN FRANCISCO, CA 94111		Mailing Address PIER 1, BAY 1 SAN FRANCISCO, CA 94111		N.V.		L'OS			
2. Principal Place of Business		3. Mailing Address		1)//					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		03232006 Chg-LP	CR2E003 (11/05)			
City & State	e	City & State	City & State		4. FEI Number 94-3380719	Applied For Not Applicable			
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desi	_ \$9.75 Additional			
	6. Name and Address of C	urrent Registered Agent			7. Name and Address of N	lew Registered Agent			
COBBOBA	ATION SEDVICE COMBA	NIV		Name	ame				
1201 HAYS	CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Street Address (P.O. Box Number is Not Acceptable)					
				City		FL Zip Code			
R The above	paged active submits this state	most for the guerous of changing it	to so sinte	ad office or register	ad agent or both in the Ctore	of Florida. I am familiar with, and accep			
	ions of registered agent.	nent for the purpose of changing it	is register	eo onice or register	ed agent, or both, in the state	гог гютов. Талталлаг мал, ало ассер			
SIGNATURE	Signature, typed or printed name of register	ed agent and little if applicable.				DATE			
	FILE After Ma	NOW!!! FEE IS \$500.00 y 1, 2006, Fee will be \$90	nn nn						
	A GENERAL PART	NER THAT IS A BUSINESS E	NTITY N						
12.				rm; an amendment must be filed to change a general partner. ADDRESS CHANGES ONLY					
DOCUMENT #	B9700000636	INTINEN INFORMATION							
NAME STREET ADDRESS	AMB PROPERTY, L.P. PIER 1, BAY 1			EET ADDRESS					
CITY-ST-ZIP	SAN FRANCISCO, CA 94	111	CITY	r-ST-ZIP					
DOCUMENT # NAME			STR	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			CITY	r-ST-ZIP					
DOCUMENT / NAME			STR	EET ADDRESS	3000	69609313			
STREET ADORESS CITY-ST-ZIP			CITY	r-ST-ZIP					
DOCUMENT / NAME			STR	EET ADDRESS					
STREET ADDRESS CITY - ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		······································	cır	Y-ST-ZIP					
DOCUMENT #			STR	EET ADORESS					
CITY-SI-ZIF			СІТ	Y-ST-ZIP					
			RTS	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			CIT	Y-ST-ZIP					
14. I hereby indicated or the rec	certify that the information suppled in this report is true and accurate very rustee empewered to e	ate and that my signature shall hav execute this report as required by C Tamra D. Browne, Ser	e the sarr Chapter 6 nior Vice	ne legal effect as if n 20, Florida Statutes President, AMB Pr	nade under oath; that I am a coperty Corporation, the	tutes. I further certify that the information General Partner of the limited partnership			
SIGNAT	TURE! Jame Sum	general partner of AM AMB Partners II, L.P.		iy, L.r., the general		April 1, 2006 415-394-9000			

Daytime Phone #

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REFERENCE

5160089

AUTHORIZATION

COST LIMIT \$ 500.00

ORDER DATE: April 5, 2006

ORDER TIME : 10:09 AM

ORDER NO. : 966957-050

CUSTOMER NO:

5160089

ANNUAL REPORT FILING

NAME: AMB PARTNERS II, L.P.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 2955

EXAMINER'S INITIALS: