

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90161 024 ***150.00

DOCUMENT # F00000006660

1. Entity Name

RREEF America REIT II Corp. T

DO NOT WRITE IN THIS SPACE

654977

2. Principal Place of Business 875 North Michigan Avenue Suite, Apt. #, etc. Suite 4100	3. Mailing Address 875 North Michigan Avenue Suite, Apt. #, etc. Suite 4100
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City & State Chicago, Illinois	City & State Chicago, IL	4. FEI Number 36-4404777	Applied For ☐ Not Applicable
Zip 60611-1901	Country U.S.A.	Zip 60611-1901	Country U.S.A.

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when certifying)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President and Director Donald A. King, Jr. 875 North Michigan Avenue, 41st Fl. Chicago, Illinois 60611-1901	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Robert J. Cook 875 N. Michigan Ave., 41st Fl. Chicago, Illinois 60611-1901	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Gary T. Kachadurian 875 N. Michigan Ave., 41 Chicago, Ill. 60611	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer and Secretary Paula M. Ferkull 875 North Michigan Avenue, 41st Fl. Chicago, Illinois 60611-1901	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address with all other like empowered.

SIGNATURE:

Paula M. Ferkull

Paula M. Ferkull, Treasurer/Secretary, 04-12-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

312-266

9300

CR2E034B (12/01)