


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90015 017 ***150.00

DOCUMENT # F06000004951	
1. Entity Name RREEF AMERICA REIT II CORP. ZZZZ	

Principal Place of Business 875 NORTH MICHIGAN AVE 41ST FLOOR CHICAGO, IL 60611-1901	Mailing Address 875 NORTH MICHIGAN AVE 41ST FLOOR CHICAGO, IL 60611-1901
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



01032008 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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 _____ (NOTE: Registered Agent signature required when reinstating)

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GONZALEZ, TIMOTHY K <input type="checkbox"/> Delete 101 CALIFORNIA STREET 26TH FLOOR SAN FRANCISCO, CA 941115853	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ROBERT J. COOK 875 N. MICHIGAN AVE., 41st fl., CHICAGO ILLINOIS, 60611-1901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANGELO, BERNARD J <input type="checkbox"/> Delete 445 BROAD HOLLOW ROAD SUITE 239 MELVILLE, NY 11747	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT & SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SUSAN E. MCCLINTOCK 875 N. MICHIGAN AVE., 41ST FL., CHICAGO ILLINOIS, 60611-1901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLAISING, ANGELA C <input type="checkbox"/> Delete 875 NORTH MICHIGAN AVE 41ST FLOOR CHICAGO, IL 606111901	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BREUNER, DAVID T <input checked="" type="checkbox"/> Delete 101 CALIFORNIA STREET 26TH FLOOR SAN FRANCISCO, CA 941115853	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAVEY, CRAIG S <input type="checkbox"/> Delete 101 CALIFORNIA STREET 26TH FLOOR SAN FRANCISCO, CA 941115853	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CASELLINI, MARLENA M <input type="checkbox"/> Delete 101 CALIFORNIA STREET 26TH FLOOR SAN FRANCISCO, CA 941115853	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan E. McClintock **SUSAN E. MCCLINTOCK, VP & SEC., 01/04/08, 312/266-9300**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #