2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # K90618 1. Entity Name NMV-II, INC. 2008 FEB 27 PM 12: 19 Principal Place of Business Mailing Address SECRETARY OF STATE 13737 NOEL ROAD 13737 NOEL ROAD TALLAHASSEE, FLORIDA **STE 100 STE 100** DALLAS, TX 75240 US DALLAS, TX 75240 01112008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 95-4223494 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM DO NOT WRITE 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS TITLE NAME FELDMAN, MITCHELL 500 W CYPRESS CREEK RD. #700 STREET ADORESS CITY-ST-ZIP FT LAUDERDALE, FL 33309 900119548819 SD LARSEN, CAITLIN M NAME STREET ADDRESS 13737 NOEL ROAD, SUITE 100 CITY-ST-ZIP DALLAS, TX 75240 TITLE NAME SHERMAN, JEFFREY S STREET ADDRESS 13737 NOEL ROAD, SUITE 100 DO NOT WRITE CITY-ST-ZIP DALLAS, TX 75240 IN THIS SPACE TITLE MACK, KRISTINA A STREET ADORESS 13737 NOEL ROAD, SUITE 100 CITY-ST-ZIP DALLAS, TX 75240 TITLE STREET ADDRESS CITY-ST-ZIP TUTLE NAME STREET ADDRESS

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 arn an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by C' changed, or on an attachment with an address, with all other like empowered.

Kristina A. Mack, Assistant Secretary, 1/14/08

Phone 469-893-2701

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR