2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005527

GITTLEMAN, GARY

MIAMI, FL 33157

8149 SW 190TH STREET

Name:

Address:

City-St-Zip:

Entity Name: IDEAL WAREHOUSE PARK LLC II

FILED Mar 16, 2006 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | |
|---|------------|--|-----------------|---|-----------------------------------|
| 19100 SW | 106 AVE | | | | |
| 12 MIAMI, FL | 33157 | | | | |
| Current Mailing Address: | | | | New Mailing Address: | |
| 19100 SW 106 AVE | | | | | |
| 12 MIAMI, FL | 33157 | | | | |
| FEI Number: | 65-1010280 | FEI Number Applied I | For () FEI Num | nber Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | |
| BROWN, B. MACKAY ESQ. % WHITE & BROWN, P.A. 9000 SW 152ND ST., STE. 102 MIAMI, FL 33157 US | | | | GITTLEMAN, JEFFREY 19100 S.W. 106TH AVENUE SUITE 12 MIAMI, FL 33157 US | |
| 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: JEFFREY GITTLEMAN | | | | | 03/16/2006 |
| Electronic Signature of Registered Agent | | | | | Date |
| MANAGING MEMBERS/MANAGERS: | | | | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | | () Delete I, BARBARA WOOD PLAZA DRIVE NVILLE, NC 28739 | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | | () Delete I, JEFF AVENUE PH6 CH, FL 33139 | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: | MGRM | () Delete | | Title: | () Change () Addition |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Name:

Address:

City-St-Zip:

SIGNATURE: JEFFREY GITTLEMAN MGRM 03/16/2006