

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005527

FILED
May 03, 2007
Secretary of State

Entity Name: IDEAL WAREHOUSE PARK LLC II

Current Principal Place of Business:

19100 SW 106 AVE
12
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

19100 SW 106 AVE
12
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-1010280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: GITTLEMAN, BARBARA
Address: 1101 FLEETWOOD PLAZA DRIVE
City-St-Zip: HENDERSONVILLE, NC 28739

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: GITTLEMAN, JEFF
Address: 800 WEST AVENUE PH6
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: GITTLEMAN, GARY
Address: 8149 SW 190TH STREET
City-St-Zip: MIAMI, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: GARY GITTLEMAN

MGRM

05/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date