

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 12, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000011992
 1. Entity Name
 THE SHOPPES OF NORTH BAY VILLAGE II, LLC



Principal Place of Business Mailing Address
 1320 S. DIXIE HWY., STE. 781 1320 S. DIXIE HWY., STE. 781
 CORAL GABLES, FL 33146 CORAL GABLES, FL 33146



03072005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 46-0519865	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, GARY L ESQ.
 PHILLIPS, EISINGER, KOSS & BROWN, P.A.
 4000 HOLLYWOOD BLVD., STE. 265 SOUTH
 HOLLYWOOD, FL 33021

**DO NOT WRITE
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$50.00
 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GREENWALD, SCOTT A
STREET ADDRESS	1320 S. DIXIE HWY., STE. 781
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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11. 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 is true and accurate and that my 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:

SCOTT GREENWALD
 SCOTT GREENWALD

3/10/2005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #