2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 08, 2005 8:00 am Secretary of State

DOCUMENT # L02000016808 1. Entity Name WAGNER SQUARE (II), LLC						03-08-2005	90029 0	46 ****5	0.00
Principal Place 1175 NE 125 MIAMI, FL 33	STREET STE 103	Mailing Address 1175 NE 125 STREET S MIAMI, FL 33161	STE 103 _.						
2. Principal Place of Business		3. Mailing Address			i i i i i i i i i i i i i i i i i i i	11 1 1 1 1			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03022005	Chg-LLC	CR2E08	33 (10/03)		
City & State		City & State		4. FEI Numbe			<u> </u>	plied For t Applicable	
Zip	Country	Zip	Country			of Status Desired		5.00 Add	itional
	6. Name and Address of Current	i Registered Agent			7. Name and	Address of New R		<u>-</u> _	<u></u>
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KOLSKY, DEBRA SINKLE 1175 NE 125 STREET STE 103 MIAMI, FL 33161		Street Add		Street Address	s (P.O. Box Number is Not Acceptable)				
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			7	City			FL	Zip Code)
	named entity submits this statement fo ions of registered agent.	r the purpose of changing its	registered o	office or regist	ered agent, or bot	h, in the State of Flo	rida. I am fa	amiliar with,	and accept
SIGNATURE .		_							
	Signature, typed or printed name of registered agent a	and title if anolicable (MOTE	· Donietorod An		ed when reinstating)		DATE		
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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: Debus And typed on printed name of signing managing member, manager, or authorized representative Date Dayling Prone #