


**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 21, 2003 8:00 am
Secretary of State

03-21-2003 90029 009 ****50.00

DOCUMENT # L02000031037

1. Entity Name
REAL ESTATE DEVELOPMENT II, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>12550 Biscayne Blvd</u> Suite, Apt. #, etc. <u>405</u> City & State <u>North Miami, FL</u> Zip <u>33181</u> Country <u>USA</u>		3. Mailing Address <u>12550 Biscayne Blvd</u> Suite, Apt. #, etc. <u>405</u> City & State <u>North Miami, FL</u> Zip <u>33181</u> Country <u>USA</u>	
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DO NOT WRITE IN THIS SPACE

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

7. Name and Address of Current Registered Agent

Name OSCAR GRISALES-RACIN, Esq.

Street Address (P.O. Box Number is Not Acceptable)
12550 Biscayne Boulevard
Suite 405

City North Miami FL Zip Code 33181

**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 [Signature] DATE 03/11/2003

FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1	
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9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>MGRM</u> <u>PERCHIK ELIAS</u> <u>12550 Biscayne Blvd. Suite 405</u> <u>North Miami, FL 33181</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>MGRM</u> <u>Real Estate International Investments & Development, LLC</u> <u>12550 Biscayne Blvd. #405</u> <u>North Miami, FL 33181</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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: [Signature] ELIAS PERCHIK DATE 03/11/2003 (305) 881-7313

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

CR2E083B (12/02)