2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000037630

1. Entity Name
JMA INVESTMENTS II, LLC



Principal Place of Business

P.O. BOX 8030 CLEARWATER, FL 33758 Mailing Address

P.O. BOX 8030

CLEARWATER, FL 33758

FILED Apr 30, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04202007 No Chg-LLC	CR2E083 (11/05)	
4. FEI Number		Applied For
33-1071526		Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MALKI, MICHAEL 12170 RACE TRACJ RD TAMPA, FL 33626

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTE

NAME OF SIGNING MANAGIN

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of cha ions of registered agent.	inging its registered office or registered agent, or bot	n, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature: typed or prinled name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		DATE	
Fi D	ling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
NAME STREET ADDRESS CITY-ST-ZIP	MGRM MALKI, MICHAEL P.O. BOX 8030 CLEARWATER, FL 33758		U00000745350 05/16/07-80025-014 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			00/10/01 00020 014 00.00
TITLE MAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS	\sim		

11. I hereby certify that the information supplied with this fling does not qualify for the exemptions contained in Chapter 119, 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 repeiver or frustee empowered to execute this report as required by Chapter 608, Florida Statutes.