2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 19, 2005 8:00 am Secretary of State

DOCUMENT # L03000038128 1. Entity Name THE CENTERPOINT GROUP II, LLC					04-19-2005 90008 033 ****50.00				
Principal Plac	e of Business	Mailing Address			1				
7510 BEACHVIEW DRIVE NORTH BAY VILLAGE, FL 33141 X		7510 BEACHVIEW DRIVE North Bay Village, FL 33141							
ionii da viezioza a sorri y						II NUMBE MINI COM COM ESTA		191 HT10 HT10 F1 101	FEI (II 185) -
2. Principal Place of Business 1792.7 - 792.9 EAST DRIVE		3. Mailing Address							
7/92/] - Suite, Apt.		Suite, Apt. #, etc.			01272005	Ch= 11.0	CDOEO	00 (40/00)	
City & State		City & State			4. FEI Numb	Chg-LLC	CHZEU	83 (10/03)	plied For
NORTH BAY VILLAGE, FL				56-240			No	t Applicable	
Zip 331	4 Country	Zip	Country	у	5. Certificate	e of Status Desired		\$5.00 Add Fee Required	
	6. Name and Address of Current R		Name _I		d Address of New Re		· .		
KNATTONGCOME, SIRIPHAN			-	Name KNATTONGCOME, SIRIPHAN Street Address (P.O. Box Number is Not Acceptable)					<u>, </u>
MIAMISH	97TH STREET ORES, FL 33138 X		<u> </u>	direct Address	(F.O. BOX NUM	Del Is Not Acceptable)	, 		
	,				BEACH	1 VIEW DR	SIVE		
1, , , , , , ,				City NORTH BAY VILLAGE FL Zip Code 33/4/					3141
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its :	registered	d office or registe	ered agent, or bo	oth, in the State of Flor	rida. Iam f	amiliar with,	and accept
SIGNATURE Signature hiped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	Signature speed or printed name of registered agent an	d the frapplicable. (NOTE	: Hegistered A	Agent signature require	d when reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2005					Make check payable to Florida Department of State				
D:	ue by May 1, 2005	•						-	•
9.	ue by May 1, 2005 MANAGING MEMBER		10.		D 44		Departmo	ent of State	
,	ue by May 1, 2005	S/MANAGERS	10. TITLE NAME	M6	TTO AL GOOD	ADDITIONS/O	Department CHANGES	ent of State	■ Addition
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGRM KNATTONGCOME, SIRIPHAN 1260 N.E. 97TH STREET		TITLE NAME STREET	ADDRESS 757	TTON 6CO. D BEACH	ADDITIONS/O ME, SIRIF VLEW DRII	CHANGES PHAN	ent of State	
9. TITLE NAME	MANAGING MEMBER MGRM KNATTONGCOME, SIRIPHAN 1260 N.E. 97TH STREET		TITLE NAME	TADORESS 7.57. ST-ZIP NO.6	TTON 6 CO. O BEACH RTH BAY RM	ADDITIONS/O ME, SIRIF VLEW DRII VILLAGE,	CHANGES PHAN VE FL	Change	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBER MGRM KNATTONGCOME, SIRIPHAN 1260 N.E. 97TH STREET MIAMI SHORES, FL 33138 MGRM NETHONGKOME, YOUNGYUTH	☐ Delete	TITLE NAME STREET CITY-S TITLE NAME	TADORESS 757. ST-ZIP NO.6	TION 6CO. O BEACH RTH BAY RM	ADDITIONS/O ME, SIRIF VLEW DRII VILLAGE,	CHANGES PHAN FL THAN	ent of State	☐ Addition
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