## 2006 LIMITED LIABILITY COMPANY

## FILED ANNUAL REPORT May 03, 2006 08:00 AM Secretary of State **DOCUMENT # L03000044012** 1. Entity Name VO ENTERPRISES II, LLC Principal Place of Business Mailing Address **4729 HIGHLANDS PLACE CIRCLE** PO BOX 7891 LAKELAND, FL 33807 LAKELAND, FL 33813 US US 05012006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0408714 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LY, PHUONG A DO NOT WRITE 4729 HIGHLANDS PLACE CIR LAKELAND, FL 33813 IN THIS SPACE \$. 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 readont (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME VO, PHUC 4729 HIGHLANDS PLACE CIRCLE STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 U00000562264 05/19/06-80044-017 50.00 MGRM TITLE LY, PHUONG NAME 4729 HIGHLANDS PLACE CIRCLE STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 TITLE STREET ADDRESS DO NOT WRITE CTTY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Daytima Phone #