

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032264

FILED
Jan 17, 2005
Secretary of State

Entity Name: BOCA BEACH PROPERTIES II, LLC

Current Principal Place of Business:

951 N.W. 13TH STREET
BOCA RATON, FL 33432

New Principal Place of Business:

951 N.W. 13TH STREET
SUITE 5D
BOCA RATON, FL 33486

Current Mailing Address:

951 N.W. 13TH STREET
BOCA RATON, FL 33432

New Mailing Address:

951 N.W. 13TH STREET
SUITE 5D
BOCA RATON, FL 33486

FEI Number: 59-2781453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEXLER, JERRY R
951 N.W. 13TH STREET
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

WEXLER, JERRY R
951 N.W. 13TH STREET
SUITE 5D
BOCA RATON, FL 33486 US

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.

SIGNATURE:

01/17/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: WEXLER, JERRY R
Address: 951 N.W. 13TH STREET
City-St-Zip: BOCA RATON, FL 33432

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WEXLER, JERRY R
Address: 951 N.W. 13TH STREET, SUITE 5D
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM () Change (X) Addition
Name: BLANCO, JACK J
Address: 951 NW 13 STREET, SUITE 5D
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JERRY R. WEXLER

MGMR

01/17/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date