2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000024102

City-St-Zip:

CORAL GABLES, FL 33134

Entity Name: ST. TROPEZ II HOLDINGS, LLC

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3211 PONCE DE LEON BLVD, STE 301 CORAL GABLES, FL 33134 **Current Mailing Address: New Mailing Address:** 3211 PONCE DE LEON BLVD, STE 301 CORAL GABLES, FL 33134 FEI Number: 20-2498472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARKER, REX M 3211 PONCE DE LEON BLVD, STE 301 CORAL GABLES, FL 33134 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MILTON, JOSEPH Name: Name: Address: 3211 PONCE DE LEON BLVD #301 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: GIL, YOSI Name: Address: 3211 PONCE DE LEON BLVD #301 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGR () Delete Title: () Change () Addition BARKER, REX M Name: Name: 3211 PONCE DE LEON Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: REX M BARKER MGR 03/10/2009