

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000071805

**FILED  
Apr 28, 2009  
Secretary of State**

Entity Name: NEW GABLES II LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

1140 NE 163RD STREET  
SUITE 28  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

**New Mailing Address:**

1140 NE 163RD STREET  
SUITE 28  
NORTH MIAMI BEACH, FL 33162

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

NG, MANTIC  
1140 NE 163RD STREET  
SUITE 28  
NORTH MIAMI BEACH, FL 33162 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: NG, DORIS  
Address: 1140 NE 163RD STREET, SUITE 28  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: DORIS NG

MGR

04/28/2009

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