

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000087046**

1. Entity Name  
**NORTH STONE II, LLC**



Principal Place of Business  
**20201 EAST COUNTRY CLUB DRIVE, STE. 2310  
AVENTURA, FL 33180**

Mailing Address  
**20201 EAST COUNTRY CLUB DRIVE, STE. 2310  
AVENTURA, FL 33180**



04112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**20-3423823**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**HOTTE, JOHN F ESQ.  
C/O FRAZIER, HOTTE & ASSOCIATES, P.A.  
6550 NORTH FEDERAL HIGHWAY, SUITE 220  
FT. LAUDERDALE, FL 33308**

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
DARER, EDUARDO  
20201 EAST COUNTRY CLUB DRIVE, STE. 2310  
AVENTURA, FL 33180**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
DARER, OSCAR  
20201 EAST COUNTRY CLUB DRIVE, STE. 2310  
AVENTURA, FL 33180**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
DARER, ENRIQUE  
20201 EAST COUNTRY CLUB DRIVE, STE. 2310  
AVENTURA, FL 33180**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000708950  
04/24/07-80136-001 55.00

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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**EDUARDO DARER**

Date

**4/11/07**

Daytime Phone #

**305 9362781**