2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L97000000285

1. Entity Name

TAUBER REAL ESTATE HOLDINGS II, L.C.

Principal Place of Business	Mailing Address
133 THIRD ST N. ST PETERSBURG FL 33701	2320 PELHAM RD N. ST PETERSBURG FL 33710-3664

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	**4.** FEI Number NOT APPLICABLE Applied For / Not Applicable
Zip	Country	Zip	Country	**5.** Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALLWEISS, MICHAEL D ESQ. 4024 PARK STREET, NORTH SUITE 202 ST. PETERSBURG FL 33709	Name **PAUL TAUBER** Street Address (P.O. Box Number is Not Acceptable) **2320 PELHAM RD. N.** City **ST. PETERSBURG** FL Zip Code **33710**

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.

SIGNATURE _~~Paul S Tauber~~_   **PAUL S TAUBER   22 FEB 2000**

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE MGR **NAME** TAUBER, PAUL S **STREET ADDRESS** 2320 PELHAM RD N. **CITY-ST-ZIP** ST. PETERSBURG FL 33710	☐ Delete	**TITLE** **NAME** **STREET ADDRESS** **CITY-ST-ZIP** 3/8/00	☐ Change ☐ Addition
TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP**	☐ Delete	900003164759---8 -03/10/00--01018--003	☐ Change ☐ Addition
TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP**	☐ Delete	******50.00 ******50.00	☐ Change ☐ Addition
TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP**	☐ Delete		☐ Change ☐ Addition
TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP**	☐ Delete		☐ Change ☐ Addition
TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP**	☐ Delete		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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 _~~Paul S Tauber~~_   PAUL S TAUBER   2/22/00   (727) 345 3370

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER   Date   Daytime Phone #

CR2E083 (9/99)