


50.00

## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # M00000000700</b>			
1. Entity Name <b>PETROLEUM REALTY II, LLC</b>			
Principal Place of Business <b>1200 BRICKELL AVENUE, SUITE 1500 MIAMI, FL 33131</b>		Mailing Address <b>1200 BRICKELL AVENUE, SUITE 1500 MIAMI, FL 33131</b>	
2. Principal Place of Business <b>801 Arthur Godfrey Rd</b>		3. Mailing Address <b>Same as #2</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Miami Beach, FL</b>		City & State	
Zip <b>33140</b>		Country	
4. FEI Number <b>31-1643295</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>		01102005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>		<b>Make check payable to Florida Department of State</b>	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PETROLEUM REALTY INVESTMENT PARTNERS, L.P. 1200 BRICKELL AVENUE, SUITE 1500 MIAMI, FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <b>Scott Fitzsim</b>		Date <b>7/7/05</b> Daytime Phone # <b>305-774-8914</b>	