2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M00000002449

1. Entity Name J.L.S., GP II LLC



60030201

Principal Place of Business 400 ARTHUR GODFREY RD. SUITE 200

MIAMI BEACH, FL 33140

Mailing Address

400 Arthur Godfrey Rd. Suite 200

MIAMI BEACH, FL 33140

FILED

Apr 28, 2008 8:00 am Secretary of State

04-28-2008 90046 050 ***138.75

03182008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-1057042

Applied Fo

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

8. 3	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 acc
	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

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHEPPARD, ERIC D 400 ARTHUR GODFREY RD STE 200 MIAMI BEACH, FL 33140		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WOLMAN, PHILIP 400 ARTHUR GODFREY RD STE 200 MIAMI BEACH, FL 33140		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

DO NOT WRITE IN THIS SPACE

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 informat 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

4/24/04