2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N05000003849



FILED Jan 28, 2008 8:00 am Secretary of State

1. Entity Nam	NOR II CONDOMINIUM AS				01-28-2008 900	41 027 ****61.23	5	
Principal Place of Business 1836 ARTHUR ST HOLLYWOOD, FL 33020		Mailing Address 1836 ARTHUR ST HOLLYWOOD, FL 33020			40-			
2. Principal P	3. Mailing Address	ng Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04400000				
				01162008 Chg-NP	CR2E037 (12/06)			
City & State		City & State			4. FEI Number 20-4695993	 	oplied For ot Applicable	
Zip Country		Zip C		5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name and Address of Current	t Registered Agent			7. Name and Address of New Re			
DOCEMENTE NEAR CARY				Name				
ROSENSUEIG, NEAL GARY 3711 YAN BURON ST#8 HOLLYWOOD, FL 33021			ধিক 📑	Street Address (P.O. Box Number is Not Acceptable)				
,	332,12 3332.							
		City		City		FL Zip Cod	le	
	e named entity submits this statement fi tions of registered agent.	or the purpose of changing its i	registered (office or registe	red agent, or both, in the State of Flori	da. I am familiar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered agen	t and little if annicable (NOTE)				0.45		
		to the inappropers. The it	: Hegistered Ag	gent signature require	g when reinstating)	DATE		
:								
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Cam Trust Fund C	paign Fina	incing	\$5.00 May Be Added to Fees Florid	ke check payable to		
10.	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND D	9. Election Cam Trust Fund C	paign Final ontribution.	incing	\$5.00 May Be Added to Fees ADDITIONS/CHANGES TO OFFICER	ke check payable to the check	tate,	
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12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 631-667-2403

SIGNATURE:

Yalsas Tagarello
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR