


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000017761	
1. Entity Name VILLAGE OAKS REALTY-II, INC.	

Principal Place of Business 122 GOLDEN BEACH DRIVE GOLDEN BEACH, FL 33160	Mailing Address 122 GOLDEN BEACH DRIVE GOLDEN BEACH, FL 33160
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DO NOT WRITE IN THIS SPACE



04252005 No Chg-P CR2E034 (10/03)

4. FEI Number 01-0618825	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

STOK, ROBERT A ESQ.
2875 N.E. 191ST ST.
STE. 304
AVENTURA, FL 33180

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MELTZER, ODED T 122 GOLDEN BEACH DR. GOLDEN BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOK, SOPHIA P 2875 NE 191ST ST., STE. 304 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PECHTOR, JACK 715 PARK OF COMMERCE DRIVE BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MELTZER, ARIEL 122 GOLDEN BEACH DRIVE GOLDEN BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000345415
04/30/05-80031-022 150.00

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12. 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 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 607, 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.

SIGNATURE: *[Signature]* 4/26/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #