2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020501

FILED Jan 17, 2005 Secretary of State

Entity Name: FLORIDA NATIONAL MARKETING ASSOCIATES, INC., II

Current P	rincipal Place	of Business:	New Principal Place	of Business:
I2511 RAI CORAL G	MIRO ST. ABLES, FL 33	156		
Current Mailing Address:		New Mailing Address:		
12511 RAI CORAL G	MIRO ST. ABLES, FL 33	156		
El Number	: 65-1084775	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
WAYNE, F 1225 S.W. MAMI, FL	. 87TH AVENU	E		
,				
	e named entity : e of Florida.	submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,
	e of Florida.	submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida. RE:	submits this statement for the particular sta		od office or registered agent, or both,
n the Stat	e of Florida. É RE: Electror			
n the Stati	e of Florida. É RE: Electror	nic Signature of Registered Ag	ent	
n the State	e of Florida. RE: Electror mpaign Financing S AND DIREC	nic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete TERESA ST.	ent	Date
n the Stati SIGNATU Election Car DFFICER Title: Jame: kddress:	e of Florida. RE: Electror mpaign Financing S AND DIREC PT () PALCZYNSKI, 12511 RAMIRO CORAL GABLE	ric Signature of Registered Ag g Trust Fund Contribution (). TORS: Delete TERESA ST. S, FL 33156 Delete BILLA R. #TH10	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA PALCZYNSKI PRES 01/17/2005