## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 04, 2004 8:00 am Secretary of State

DOCUMENT # P01000115334  1. Entity Name LIBERTY HOUSE II, INC.			02-04-2004 90047 009 ***150.00 <b>54003592</b>				
Principal Place of Business  455 SW 15 STREET FORT LAUDERDALE, FL 33315  Mailing Address  3328 NE 169TH STREET NORTH MIAMI BEACH, FL 33160							
3. Mailing Address 33 S. FEDERAL HWY							
Suite, Apt. #, etc.		7	01102004	Chg-P	CR2E	034 (10/03)	
BOCA RATON,	FIORID	A		•		h——	plied For t Applicable
33432	Country US A					Fee Require	
Registered Agent	Name		7. Name and	Address of Ne	w Registered	Agent	
MEACHAM, ROBERT C ESQ			s (P.O. Box Number is Not Acceptable)				
					FL	Zip Cod	е
and title if applicable. (NOTE:	Registered Agent signate	ure required	when reinstating)		DATE		
DIRECTORS	11.		ADDITIONS	/CHANGES TO	OFFICERS AND	D DIRECTOR	S IN 11
□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					in a	
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<i>₹1.</i> _1\/X	1011)		☐ Change	Addition
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	3328 NE 169TH STREE NORTH MIAMI BEACH, F  3. Mailing Address 3.33 S. FFI Suite, Apt. #, etc.  City & State, Tow, Zip 33.43.2  Registered Agent  The purpose of changing its r  The purpose of changing its r  Trust Fund Contri  DIRECTORS  Delete  Delete  Delete  Delete	3328 NE 169TH STREET NORTH MIAMI BEACH, FL 33160  3. Mailing Address 3.35. FEDERAL M.  Suite, Apt. #, etc.  City & State BOCA RATON, Florid Zip Country 33432  Registered Agent  Name  Street A  City  1. City  2. City  2. City  3. Mailing Address Agent  Agent signate  Agent signate  Agent signate  City  1. Cit	3328 NE 169TH STREET NORTH MIAMI BEACH, FL 33160  3. Mailing Address 233 S. FFDERAL HWY Suite, Apt. #, etc. CIty & State BOCA RATON, Florida Zip Country Street Address (F City  1. City  1. City  1. City  2. City  2. Country  2. Country  3. Mailing Address A32 Country  2. Country  3. Mare  Street Address (F City  2. City  2. City  3. Mare  Street Address (F City  4. City  5. City  5. City  5. City  6. City  7. City  9. Election Campaign Financing Adde STREET ADDRESS CITY-ST-ZIP  1. City  1. Cit	3. Mailing Address 3. S. FEDERAL HWY Suite, Apt. #, etc.  City & State Boch RATON, Florida Country Suite Agent Country Suite Address Country Sup Country Street Address (P.O. Box Numb City  The purpose of changing its registered office or registered agent, or both country City  The purpose of changing its registered Agent signature required when reinstating)  9. Election Campaign Financing Trust Fund Contribution.  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP	3. Mailing Address 3. Mailing Address 3. Mailing Address 3. Mailing Address 3. S. FFDERAL HWY  Suite, Apt. #, etc.  City & State,  Country 3. Country 4. FEI Number 65-1158405 5. Certificate of Status Desire 65-1158405  City 61. Name and Address of Ne  Name  Street Address (P.O. Box Number is Not Accept  City  City  The purpose of changing its registered office or registered agent, or both, in the State of Status Desire  City  The purpose of changing its registered office or registered agent, or both, in the State of Status Desire  City  The purpose of changing its registered office or registered agent, or both, in the State of Status Desire  City  The purpose of changing its registered office or registered agent, or both, in the State of Status Desire  Street Address (P.O. Box Number is Not Accept  City  The purpose of changing its registered office or registered agent, or both, in the State of Status Desire  Street Address (P.O. Box Number is Not Accept  Title  NAME  STREET ADDRESS  CITY-ST-2P  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-2P	3.328 NE 169TH STREET NORTH MIAMI BEACH, FL 33160  3. Meiling Address 3.5. FEDERAL HWY Suite. Apt. #, etc.  CILS City 8 State BOCA KATON, FLORIDA 6.5-1158405  Zip 3.43.2 Country 5. Certificate of Status Desired   Name Name Street Address (P.O. Box Number is Not Acceptable)  City FL  The purpose of changing its registered office or registered agent, or both, in the State of Florida. I am and site # applicable.  (MOTE: Registered Agent algorature required when reinstating)  DATE  DELECTORS 11. ADDITIONS/CHANGES TO OFFICERS AN ITILE NAME STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP	3.28 NE 169TH STREET NORTH MIAMI BEACH, FL 33160  3. Mailing Address 3.33 S. FEDERAL HWY  Suite. Apt. 4, etc.  C15  C15  C15  C15  C15  C15  C15  C1

Thereby certify that the information supplies with this high does not quality for the exemption stated in section 1130/35(f), Florida Statutes. Fitting that the information indicated on this report or supplemental eport is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or truetee empoying of the 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 a Address, virtual divier like empowered.

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR

800-33-6978