

2005 FOR PROFIT CORPORATION ANNUAL REPORT

9/6/2005-90137-016-\$150.00-\$150.00

DOCUMENT # P04000047083 1. Entity Name PALM TREE HOMES CORP II					
Principal Place of Business 191 EAST 52ND PLACE HIALEAH, FL 33013			Mailing Address 191 EAST 52ND PLACE HIALEAH, FL 33013		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CUERVO, JORGE J 191 EAST 52ND PLACE HIALEAH, FL 33013				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				Applied For ☐ Not Applicable ☒	
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CUERVO, JORGE J 191 EAST 52ND PLACE HIALEAH, FL 33013	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO BELLO, ODALYS 191 EAST 52ND PLACE HIALEAH, FL 33013	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
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: <i>George Cuervo</i> 10/01/05 Signature and typed or printed name of signing officer or director		