## **2008 FOR PROFIT CORPORATION**

## **FILED ANNUAL REPORT** Apr 21, 2008 08:00 All Secretary of State **DOCUMENT # P05000005882** PHOÉNIX SENIOR LIVING II, INC. Principal Place of Business Mailing Address 5882 NW 73RD CT 5882 NW 73RD CT PARKLAND, FL 33067 PARKLAND, FL 33067 US CR2E034 (11/05) 04082008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FÉI Number Applied For 57-1216540 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROMAN, GABRIELA DO NOT WRITE 6123 NW 56 DR CORAL SPRINGS, FL 33067 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 05/07/08-80019-n16 tsn.nn TITLE ROMAN, GABRIELA NAME STREET ADDRESS 6123 NW 56 DR CORAL SPRINGS, FL 33067 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if

sobriela Roman, President

SIGNATURE:

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