

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060418

Entity Name: PHASE II HOLDINGS, INC.

FILED  
Feb 13, 2006  
Secretary of State

## Current Principal Place of Business:

201 ALHAMBRA CIRCLE STE 601  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

201 ALHAMBRA CIRCLE STE 601  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 20-2738299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHEAR, DAVID  
201 ALHAMBRA CIRCLE STE 601  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DEZER, GIL  
Address: 18101 COLLINS AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D ( ) Delete  
Name: DEZER, MICHAEL  
Address: 18101 COLLINS AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D ( ) Delete  
Name: DEZER, NOEMI  
Address: 18101 COLLINS AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: GIL DEZER

D

02/13/2006

Electronic Signature of Signing Officer or Director

Date