


Jan 04 05 10:30a LINDA GREAR CONTE

FILED  
Jan 07, 2005 8:00 am  
Secretary of State

01-07-2005 90013 012 \*\*\*150.00

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

|   |   |   |   |
|---|---|---|---|
| DOCUMENT # P93000007995   |   |    |   |
| 1. Entity Name<br>MARTINIQUE II REALTY, INC.  |   |   |   |
| Principal Place of Business<br>2655 NORTH OCEAN BLVD.<br>BOX 3<br>SINGER ISLAND, FL 33404 US  |   | Mailing Address<br>4100 NORTH OCEAN DRIVE<br>SINGER ISLAND, FL<br>33404   |   |
| 2. Principal Place of Business  |   | 3. Mailing Address  |   |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.   |   |
| City & State  |   | City & State  |   |
| Zip   | Country   | Zip   | Country   |
| 6. Name and Address of Current Registered Agent<br>GREAR, IRVING<br>14766 HAYMARKET COURT<br>WELLINGTON FL 33414  |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City FL Zip Code |   |
| 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.<br>SIGNATURE <u>Irving Grear</u> DATE <u>1/4/05</u>   |   |   |   |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2005 Fee will be \$550.00   |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees               |   |
| 10. OFFICERS AND DIRECTORS  |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D <input type="checkbox"/> Delete<br>4100 No. OCEAN DRIVE<br>14766 HAYMARKET CT<br>WELLINGTON, FL 33414<br>SINGER ISLD, FL, 33404 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 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: <u>Irving Grear</u>  |   | DATE: <u>1/4/05</u>   |   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |   | DATE  |   |

20000339



01042005 Chg-P CR2E034 (10/03)

4. FEI Number  
65-0393358 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be Added to Fees

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SIGNATURE: Irving Grear DATE: 1/4/05