2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P95000071169					FILED May 01, 2001 08:00 AM				
1. Entity Nam SCM REAL	e LTY II, INC.				Secretary	y of State	•		
Principal Plac		Mailing Address							
LAKE WORTH 33463	I FL	20TH FLOOR FT LAUDERDALE 33301	FL						
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		1	FEI Number 5-0611002			plied For	]
Zip	Country	Zip	Country		Certificate of Status Desire		.75 Add	litional	1
	6. Name and Address of Current R	egistered Agent	_	7.	Name and Address of No	w Registered Age	nt		1
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					NETH B Box Number is Not Accept	able)			
PLANTATIO	ON FL US			FLOOR					-
			City FT. L	AUDERDALE		FL	Zip Cod	9	
SIGNATURE _	named entity submits this statement for the MENNETH B. ROLLIN Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible	[	Registered Agent sig	nature required when	reinstating)	- 05/01/20 DATE	001		
Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 200 Make Check Payabl	1 Fee will be e to Departme	\$550.00 ent of State	10. Election Campaign Trust Fund Contrib	oution.	Addec	May Be to Fees	
11.	OFFICERS AND D		12.	A	DDITIONS/CHANGES TO				] _
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOURHIS MARC L 110 SE 6TH ST, 20TH FL FT LAUDERDALE	☐ Delete  FL 33301	NAME STREET ADDRES CITY-ST-ZIP	s			Change	☐ Addition	034 (11/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOORE STEPHEN C 110 SE 6TH ST, 20TH FL FT LAUDERDALE	Delete , FL 33301	TITLE NAME STREET ADDRES: CITY-ST-ZIP	s			Change	Addition	CR2E(
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS FERRANDO JONATHAN P 110 SE 6TH ST, 20TH FL FT LAUDERDALE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	s			Change	☐ Addition	
title Name Street address City-St-Zip	D MAROONE MICHAEL E 110 SE 6TH ST, 20TH FL FT LAUDERDALE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MAROON \$ 110 SE 6T	H ST, 20TH FL	FL 333	Change	☐ Addition	•
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	s			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	s			Change	☐ Addition	•
of the cor changed,	certify that the information supplied with the on this report or supplemental report is to poration or the receiver or trustee empower or on an attachment with an address, with the contract of the contract	ered to execute this report a h all other like empowered.		i nave the same hapter 607, Flo	e legal effect as it made un rida Statutes; and that my r				
SIGNAT		NTED NAME OF SIGNING OFFICER O	OR DIRECTOR		VSD 05/01/2001 Date	, Daytım	e Phone #		

Daytime Phone #