2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000027641

FILED Apr 22, 2007 Secretary of State

Entity Name: CHRISTIAN BROTHERS SERVICES II, INC.	
Current Principal Place of Business:	New Principal Place of Business:
511 N.W. 49TH ST. MIAMI, FL 33056	511 N.W. 49TH ST. MIAMI, FL 33127
Current Mailing Address:	New Mailing Address:
511 N.W. 49TH ST. MIAMI, FL 33056	511 N.W. 49TH ST. MIAMI, FL 33127
FEI Number: 65-0654912 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
DONALD, ARCHIE 511 N.W. 49TH ST. MIAMI, FL 33056 US	DONALD, ARCHIE 511 N.W. 49TH ST. MIAMI, FL 33127 US
The above named entity submits this statement for the purpose of in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: ARCHIE DONALD	04/22/2007
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PD () Delete Name: DONALD, ARCHIE Address: 511 N.W. 49TH ST City-St-Zip: MIAMI, FL 33127	Title: () Change () Addition Name: Address: City-St-Zip:
Title: V () Delete Name: DONALD, MAURICE Address: 511 NW 49TH ST City-St-Zip: MIAMI, FL 33127	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: ARCHIE DONALD PD 04/22/2007