

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000074995

FILED
Mar 08, 2006
Secretary of State

Entity Name: A NEW HOCKE SHOPPE II, INC.

Current Principal Place of Business:

15455 W DIXIE HWY
UNITS P & Q
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

754 N E 167TH STREET
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-0698834 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUKSHINSKI, YARON
754 N E 167TH STREET
NORTH MIAMI BEACH, FL 33162 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: PDT () Delete
Name: LUKSHINSKI, YARON
Address: 754 NE 167 ST
City-St-Zip: N MIAMI BEACH, FL 33162

Title: VPD () Delete
Name: LALOUM, PAUL C
Address: 754 NE 167 ST
City-St-Zip: N MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: YARON LUKSHINSKI

PRES

03/08/2006

Electronic Signature of Signing Officer or Director

_____ Date