2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 19, 2008
Secretary of State

DOCUMENT# P96000100858

Entity Name: SEQUEL II, INC.

Current Principal Place of Business:

8949 S.E. BRIDGE RD.
#289
HOBE SOUND, FL 33455 US

New Principal Place of Business:

Current Mailing Address:

8949 S.E. BRIDGE RD.
#289
HOBE SOUND, FL 33455 US

New Mailing Address:

FEI Number: 65-0719943 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZEDNEK, GEORGE ESQ.
310 S.E. 13TH STREET
FT. LAUDERDALE, FL 33316 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

OFFICERS AND DIRECTORS:

Title: PTV ( ) Delete
Name: RAMSEY, DOUG A
Address: 8949 S.E. BRIDGE RD., STE 289
City-St-Zip: HOBE SOUND, FL 33455

Title: S ( ) Delete
Name: RAMSEY, BEVERLY
Address: 8949 S.E. BRIDGE RD. STE 289
City-St-Zip: HOBE SOUND, FL 33455

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T ( ) Change (X) Addition
Name: RAMSEY, ASHLEY N
Address: 8949 S.E. BRIDGE RD. STE 289
City-St-Zip: HOBE SOUND, FL 33455

Title: VP ( ) Change (X) Addition
Name: RAMSEY, BRIAN R
Address: 10466 S.E. BRIDGE RD. STE 289
City-St-Zip: HOBE SOUND, FL 33455

I hereby certify that the information supplied with this filing does not qualify 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: ASHLEY RAMSEY T 12/19/2008

Electronic Signature of Signing Officer or Director Date