2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000013699

FARENHEM, ROBERT

18659 SW 12TH STREET

PEMBROKE PINES, FL 33029

Name:

Address:

City-St-Zip:

FILED Apr 06, 2005 Secretary of State

Entity Na	me: URIKA II,	INC.							
Current Principal Place of Business:				New Principal Place of Business:					
URIKA II IN 10860 MIR ESTERO,	OMAR OUTLE	ET DR							
Current Mailing Address:				New Mailing Address:					
URIKA II IN 10860 MIR ESTERO,	OMAR OUTLE	ET DR							
FEI Number	: 59-3501158	FEI Number Applied For ()	FEI Numb	er Not Appli	cable ()	Certifica	ate of Status De	sired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:					
		, SUITE 201							
	named entity e of Florida.	submits this statement for the	purpose of	changing it	s registered	d office or r	registered age	∍nt, or both,	
SIGNATU	RE:								
	Electron	nic Signature of Registered A	gent				Date		
Election Car	npaign Financin	g Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	D (COLASSO, FR 567 PARKWOO NAPLES, FL 3	DD LANE	N #	Title: Name: Address: Dity-St-Zip:		() Change	() Addition		
Title: Name: Address: City-St-Zip:	D (COLASSO, ST 567 PARKWOO NAPLES, FL 3	DD LANE	N A	ītle: lame: lddress: Dity-St-Zip:		()Change	() Addition		
Title: Name: Address: City-St-Zip:	FARENHEM, L 18659 SW 12T		N A	Title: Jame: Address: Dity-St-Zip:	D FARENHEM, 10817 GARE DAVIE, FL 3	DEN RIDGE (. ,		
Title:	D () Delete	Т	itle:	D	(X) Change	() Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

FARENHEM, ROBERT

DAVIE, FL 33328

10817 GARDEN RIDGE CT

SIGNATURE: LAURA FARENHEM D 04/06/2005