2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000016044

1. Entity Name

MARTNI SARASOTA II, INC.

Principal Place of Business

Mailing Address

5728 MAJOR BLVD

5728 MAJOR BLVD

STE 601 ORLANDO, FL 32819 STE 601 ORLANDO, FL 32819 FILED Apr 11, 2007 08:00 All Secretary of State



DO NOT WRITE IN THIS SPACE

03202007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3558229

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KHATIB, RASHID A 5728 MAJOR BLVD STE 601 ORLANDO, FL 32819

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOWIL! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS KHATIB, RASHID A 5728 MAJOR BLVD STE 601 ORLANDO, FL 32819				U00000700056 04/20/07-80002-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HODGE, RANDALL R 5728 MAJOR BLVD STE 601 ORLANDO, FL 32819				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KHOURI, ZAHI W 5728 MAJOR BLVD STE 601 ORLANDO, FL 32819			. DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR