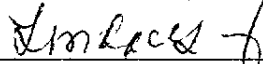


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000037086		
1. Entity Name TAURUS APARTMENTS STAR II, INC.		
Principal Place of Business 1350 E NEWPORT CENTER SUITE 206 DEERFIELD BEACH, FL 33442 US		Mailing Address P.O. BOX 4219 DEERFIELD BEACH, FL 33442-4219 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent KAY, JAMES R KAY LAW OFFICES 700 VILLAGE SQUARE CROSSING, STE 102B PALM BEACH GARDENS, FL 33410		 04212006 No Chg-P CR2E034 (11/05) 4. FEI Number 65-0921503 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required Applied For Not Applicable
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)		DO NOT WRITE IN THIS SPACE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	D	
NAME	REIBLING, LORENZ	
STREET ADDRESS	1350 E NEWPORT CENTER DR STE 206	
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442	
TITLE	D	
NAME	REIBLING, GUENTHER	
STREET ADDRESS	1350 E NEWPORT CENTER DR STE 206	
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442	
TITLE	D	
NAME	KASSOF, LINDA	
STREET ADDRESS	1350 E NEWPORT CENTER DRIVE STE 206	
CITY - ST - ZIP	DEERFIELD BEACH, FL 33442	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
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:  Linda G. Kassof		04/27/2006 (954) 428-4585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #