2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # F01000005765

1. Entity Name

PACIFICA HOSPITALITY GROUP, INC.



Principal Place of Business

1785 HANCOCK STREET, SUITE 100 SAN DIEGO, CA 92110

Mailing Address

1785 HANCOCK STREET, SUITE 100 SAN DIEGO, CA 92110

FILED Jul 19, 2006 8:00 am Secretary of State

07-19-2006 90003 037 ***150.00

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No Chg-P

CR2E034 (11/05)

4. FEI Number 33-0627812

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARACORP INCORPORATED 236 EAST 6TH AVENUE TALLAHASSEE, FL 32303

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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	al applicable. (NOTE: Registered A	gent signature	required when reinstating)	DATE
1122 11011111 1 22 10 4 100100		Election Campaign Financ Trust Fund Contribution,	ing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS					
CITY-ST-ZIP	S ISRANI, DEEPAK 1785 HANCOCK STREET, SUITE 100 SAN DIEGO, CA 92110 PRESIDENT ASHOK ISRANI 1785 HANCOCK ST. STE. K SAN DIEGO CA 92110 DIRECTOR ASHOK ISRANI 1785 HANCOCK STE. #10 SAN DIEGO CA 92110 SAN DIEGO CA 92110	ου -	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAN DIEGO CH TAITO		IN THIS SPACE		

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 leport 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 and the corporation of the corporation of 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

SIGNATURE: _

TITLE NAME STREET ADDRESS

REAND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 11106 619/296-9000 x 105