

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000062613

**Entity Name:** PAD APARTMENTS, INC.

**Current Principal Place of Business:**

201 ALHAMBRA CIRCLE  
SUITE #702  
CORAL GABLES, FL 33134

**Current Mailing Address:**

5100 N.W. 72 AVENUE  
SUITE D  
MIAMI, FL 33166 US

**FEI Number:** 65-0605915

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PADRON, CARLOS E  
201 ALHAMBRA CIRCLE  
SUITE 702  
CORAL GABLES, FL 33134 US

*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

**Officer/Director Detail :**

Title P  
Name PADRON, CARLOS E  
Address 201 ALHAMBRA CIRCLE  
SUITE 702  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name PADRON, CRISTINA  
Address 201 ALHAMBRA CIRCLE  
SUITE 702  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name BRYANS, ALICIA  
Address 5100 N.W. 72 AVENUE  
SUITE D  
City-State-Zip: MIAMI FL 33166

*I hereby 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 all other like empowered.*

**SIGNATURE:** ALICIA BRYANS

VP

01/15/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date