



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90031 042 ***150.00

DOCUMENT # 331343 1. Entity Name PACIFIC 9TH STREET APARTMENTS, INC.					
Principal Place of Business C/O PACIFIC R E MGMT CORP 2600 DOUGLAS RD, #1004 MIAMI, FL 33134 US			Mailing Address C/O PACIFIC R E MGMT CORP 2600 DOUGLAS RD, #1004 MIAMI, FL 33134 US		
2. Principal Place of Business 396 ALHAMBRA CIRCLE		3. Mailing Address 396 ALHAMBRA CIRCLE			
Suite, Apt. #, etc. 100		Suite, Apt. #, etc. 100			
City & State CORAL GABLES FL		City & State CORAL GABLES FL			
Zip 33134		Country		Zip 33134	
Country		4. FEI Number 13-2617356			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent MURAI, WILD, BIONDO, MATTHEWS & MORENO, PA 25 S.E. SECOND AVENUE, SUITE #900 MIAMI, FL 33131			7. Name and Address of New Registered Agent Name MURAI, WILD, BIONDO, MORENO & BROCHIN Street Address (P.O. Box Number is Not Acceptable) 2 ALHAMBRA PLAZA PENTHOUSE 1B City CORAL GABLES FL Zip Code 33134		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARMEN MORIA, MARIA DEL 2600 DOUGLAS ROAD, SUITE 1009 CORAL GABLES, FL 33139 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 396 ALHAMBRA CIRCLE STE 100 CORAL GABLES, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD ISAIAS, ESTEFANO 2600 DOUGLAS RD MIAMI, FL 33134 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 396 ALHAMBRA CIRCLE STE 100 CORAL GABLES FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD ISAIAS, ROBERTO 2600 DOUGLAS RD MIAMI, FL 33134 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 396 ALHAMBRA CIRCLE STE 100 CORAL GABLES, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ISAIAS, WILLIAM 2600 DOUGLAS RD MIAMI, FL 33134 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 396 ALHAMBRA CIRCLE STE 100 CORAL GABLES, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 another like empowered.					
SIGNATURE: 			02/09/2006		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		