2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0400000051

City-St-Zip:

DIAMOND BAR, CA 91765

FILED May 01, 2006 Secretary of State

Entity Nar	ne: PACIFIC	CAL MORTGAGE CORPORAT	TON		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	OMINO DR BAR, CA 917	765			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	OMINO DR BAR, CA 917	765			
FEI Number:	95-4516995	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
NELSON, JENNIFER A 762 HADDONSTONE CIRLE # 204 LAKE MARY, FL 32746 US			459 HAMPTON CRES #105	NELSON, JENNIFER A 459 HAMPTON CREST CIRCLE #105 LAKE MARY, FL 32746 US	
	named entity of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JENNIFER A. NELSON				05/01/2006	
Electronic Signature of Registered Agent			nt	Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CPT (ODDO, FRANK 23545 PALOM DIAMOND BAF	NO DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCS (ODDO, SANDF 23545 PALOM DIAMOND BAF	NO DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (SHARMA, DEE 23545 PALOM		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: FRANK ODDO **CPT** 05/01/2006