

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000134919

FILED  
May 01, 2009  
Secretary of State

Entity Name: ACI REALTY PEMBROKE PINES, INC.

**Current Principal Place of Business:**

5735 N.W. 151ST STREET  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

5735 N.W. 151ST STREET  
MIAMI LAKES, FL 33014

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

TOURON, FRANCISCO III  
5735 N.W. 151ST STREET  
MIAMI LAKES, FL 33014 US

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

ALONSO, ARMANDO  
5735 N.W. 151ST STREET  
MIAMI LAKES, FL 33014 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: ARMANDO ALONSO

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ALONSO, ARMANDO  
Address: 5735 N.W. 151ST STREET  
City-St-Zip: MIAMI LAKES, FL 33014

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: ARMANDO ALONSO

PS

05/01/2009

Electronic Signature of Signing Officer or Director

Date