

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000065881

FILED
Jun 19, 2009
Secretary of State

Entity Name: PACIFIC INVESTMENTS OF PINELLAS INC.

Current Principal Place of Business:

427 E TARPON AVE.
TARPON SPRINGS, FL 34689

New Principal Place of Business:

427 E. TARPON AVE.
TARPON SPRINGS, FL 34689

Current Mailing Address:

427 E TARPON AVE.
TARPON SPRINGS, FL 34689

New Mailing Address:

P.O. BOX 94
TARPON SPRINGS, FL 34688

FEI Number: 26-2978007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMIDT, NORA V
427 E TARPON AVE.
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

BROUMAND, ALEX
1225 AUDOBAN WAY
ORLANDO, FL 32804 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: ALEX BROUMAND

06/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D/V () Delete
Name: ALLDREDGE, JAMES V
Address: 4214 CANONGATE CT.
City-St-Zip: SPRING HILL, FL 34609

Title: D () Delete
Name: GIBBONS, ANN
Address: 427 E. TARPON AVE.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D/P () Delete
Name: SCHMIDT, NORA
Address: 715 E LIME STREET #310
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D/S () Delete
Name: SCHMIDT, NORA
Address: 715 E. LIME STREET#310
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MALEEM, ANGEL
Address: 427 E. TARPON AVE.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D/P (X) Change () Addition
Name: BROUMAND, ALEX
Address: 1225 AUDOBAN WAY
City-St-Zip: ORLANDO, FL 32804

Title: D/S (X) Change () Addition
Name: HEMACO
Address: 4214 CANONGATE COURT
City-St-Zip: SPRINGHILLS, FL 34609

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: JAMES ALLDREDGE

V.P.

06/19/2009

Electronic Signature of Signing Officer or Director

Date