

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000062613

Entity Name: PAD APARTMENTS, INC.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

2 ALHAMBRA PLAZA
SUITE 860
CORAL GABLES, FL 33134 US

Current Mailing Address:

2 ALHAMBRA PLAZA
SUITE 860
CORAL GABLES, FL 33134 US

FEI Number: 65-0605915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADRON, CARLOS E
2 ALHAMBRA PLAZA
SUITE 860
CORAL GABLES, FL 33134 US

New Principal Place of Business:

2320 PONCE DE LEON BOULEVARD
SECOND FLOOR
CORAL GABLES, FL 33134 US

New Mailing Address:

2320 PONCE DE LEON BOULEVARD
SECOND FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

PADRON, CARLOS E
2320 PONCE DE LEON BOULEVARD
SECOND FLOOR
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: CARLOS E. PADRON

01/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PADRON, CARLOS E
Address: 2 ALHAMBRA PLAZA, SUITE 860
City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete
Name: PADRON, CRISTINA
Address: 2 ALHAMBRA PLAZA, SUITE 860
City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete
Name: BRYANS, ALICIA
Address: 2 ALHAMBRA PLAZA, SUITE 860
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PADRON, CARLOS E
Address: 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: PADRON, CRISTINA
Address: 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: BRYANS, ALICIA
Address: 2320 PONCE DE LEON BOULEVARD, SECOND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

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: CARLOS E. PADRON

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date