

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000068615

FILED  
Mar 14, 2006  
Secretary of State

Entity Name: PYRAMID REALTY CAPITAL CORP.

## Current Principal Place of Business:

121 ALHAMBRA PLAZA  
SUITE 1249  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

121 ALHAMBRA PLAZA  
SUITE 1249  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 65-0699308

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, PAUL  
121 ALHAMBRA PLAZA, STE. 1249  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

JONES, PAUL  
121 ALHAMBRA PLAZA  
SUITE 1249  
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:

03/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JONES, PAUL L  
Address: 5900 MAYNADA ST  
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete  
Name: JONES, MARGARITA C  
Address: 5900 MAYNADA ST  
City-St-Zip: CORAL GABLES, FL 33146

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: JONES, PAUL L  
Address: 121 ALHAMBRA PLAZA, SUITE 1249  
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change ( ) Addition  
Name: JONES, MARGARITA C  
Address: 121 ALHAMBRA PLAZA, SUITE 1249  
City-St-Zip: CORAL GABLES, FL 33134

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.

SIGNATURE: PAUL L. JONES

PRES

03/14/2006

Electronic Signature of Signing Officer or Director

Date