FORM 9

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	334688
-	05062161

SEC USE ONLY						
Prefix	Serial					
DATE RE	CEIVED					

Name of Offering (check if this is an amendment and name has changed, and	indicate change.)	
The Miami South Beach Limited Partnership		RECEIVED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 5	06 🗆 Section 4(6) 🗆	ULOÉ (
Type of Filing: Dinew Filing		< JUL 2 7 2005
A. RASIC IDENTIFICATION DA	TA .	
1. Enter the information requested about the issuer		10 N
Name of Issuer (D check if this is an amendment and name has changed, and in The Miami South Beach Limited Partnership	dicate change.)	198 /89
Address of Executive Offices (Number and Street, City, State, Zip Cod 201 East Ogden Avenue Hinsdale, IL 60521	le) Telephone Number (630/325-58	Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Cod (if different from Executive Offices)	le) Telephone Number (Including Area Code)
Brief Description of Business		
Loan to developer of new homes.		- a precen
		PROCESSED JUL 29 2005
Type of Business Organization		JUL 29 2003
□ corporation 🖺 limited partnership, already formed	☐ other (please speci	fy): THOMSON
☐ business trust ☐ limited partnership, to be formed		FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year 1 0 0 4	Actual DEstim	ested
Actual or Estimated Date of Incorporation or Organization: The state of Incorporation or Organization: The state of Incorporation or Organization The state of Incorporation or Organization The state of Incorporation or Organization The state of Incorporation The state of Incorporatio	abbreviation for State:	IL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state v. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. 13.	AR.	113F.N	1 1 F M :	A 11 17	HALA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers. ☐ Beneficial Owner Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) McClaren, H. Bruce Business or Residence Address (Number and Street, City, State, Zip Code) Hinsdale, IL 60521 201 East Ogden Avenue, Suite 26 C General and/or Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Edison, Howard W. Business or Residence Address (Number and Street, City, State, Zip Code) 60521 Hinsdale, IL 201 East Ogden Avenue, Suite 2.6 Check Box(es) that Apply:

 Promoter ☐ Beneficial Owner □ Executive Officer □ Director ☑ General and/or Managing Partner Full Name (Last name first, if individual) PCHF Home Investors, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 60521 201 East Ogden Avenue, Suite 26 Hinsdale, IL ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply:

 Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply:

 [] Promoter Beneficial Owner ☐ Executive Officer □ Director C General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter □ Executive Officer □ Director ☐ Beneficial Owner ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

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				····			<u> </u>			•	<u> </u>	Yes	No
I. Has	the issuer	sold, or de			-					g?	•••••	. XX	
4 3375	. :b	_• •				-	•	ng under U				. <u>s</u> 10).00
2. Wha	is the mi	រាយវ័ាយ របរ	estment ti	iat will be	accepted	irom any i	naiviauai?		• • • • • • •		•••••		
3. Does	the offeri	ng permit	joint own	ership of a	single un	it?						Yes . K∑X	No
										indirectly, as			
to be	listed is a	n associate	d person o	r agent of	a broker	or dealer n	egistered v	vith the SE	C and/o	the offering. I with a statersons of suc	e or states	,	
						roker or de			uated pe	ASOUS OF SUC	a a bloke	1	
Full Name	(Last nan	ne first, if	individua)		 	····						
M	cClare	en, H.	Bruce										
Business o	r Residence	æ Address	(Number	and Street	, City, Sta	ate, Zip Co	ode)						
	01 Eas							sdale,	${\tt IL}$	60521			
	Associated			· · · · · · · · · · · · · · · · · · ·						···-			
States in V	Which Pers	son Listed	Has Solic	ited or Int	ends to Sc	olicit Purch	IRSETS						
	"All States					2011 1 13 01							States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]		[HI]		
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	}
[RI]	[SC]	[SD]	[TN]	[TX]	[דט]	[VT]	[VA]	[WA]	[WV]	WI	[WY]	[PR]
Full Name	(Last nan	ne first, if	individua)									
E	Edison	, Howa	rd W.										
Business o	r Residenc	æ Address	(Number	and Street	, City, Sta	ate, Zip Co	ode)						
2	201 Eas	st Oqd	len Ave	enue,	Suite	26	Hins	dale,	IL	60521			
	Associated												
States in V	Which Pers	son Listed	Has Solic	ited or Int	ends to So	licit Purch	asers			***************************************			
	"All State												States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last nan	ne first, if	individual)									
Business o	or Residence	≈ Address	(Number	and Street	, City, Su	ate, Zip Co	ode)						
Name of	Associated	Broker or	Dealer										
States in V	Which Pers	son Listed	Has Solic	ited or Int	ends to Sc	olicit Purch							
	"All State												States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
. IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]		[MS]	[MO	
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[R]]	[SC]	[SD]	ITNI	IXXI	IUTI	[TV]	[VA]	[WA]	[WV]	[WI]	IWYI	I PR	1

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold £2,000,000 € Debt ☐ Common ☐ Preferred Partnership Interests \$____ ______)**3**__ Other (Specify _ Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors . of Purchases Accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Sold Security Type of offering Regulation A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees 5,000 Printing and Engraving Costs X 16,000

59,000

X \$ 127,500

X \$ 207,500

Miscellaneous, \$1,000

b. Enter the difference between the aggregate off tion 1 and total expenses furnished in response to	Part C - Question 4.a. This difference is the		
"adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross	proceeds to the issuer used or proposed to be	:	\$'4 <u>9</u> 592,50
used for each of the purposes shown. If the amorestimate and theck the box to the left of the estimate the adjusted gross proceeds to the issuer set forth	ite. The total of the payments listed must equa	1	
the sujusted gross proceeds to the install set forth	in response to raise of Question 4.0 above.	Payments to	
		Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		90,000	当\$ 4,500,00
Purchase of real estate	🗅 :	<u></u>	_ D \$
Purchase, rental or leasing and installation of	machinery and equipment	· 	D \$
Construction or leasing of plant buildings and	d facilities 🗆 🕽	<u> </u>	_ D \$
Acquisition of other businesses (including the offering that may be used in exchange for the	assets or securities of another		
issuer pursuant to a merger)			
Repayment of indebtedness			
Working capital	🗅 🕽		Z s 2,50
Other (specify):	D \$	<u> </u>	. 🗆 \$
	🗅 🕽	3	
Column Totals	`````````````````````````````````	90,000	水 4 , 502 , 50
Total Payments Listed (column totals added)		玄 \$ 4	<u>,592,50</u> 0
	D. FEDERAL SIGNATURE		A.C.
The issuer has duly caused this notice to be signed by bellowing signature constitutes an undertaking by the uest of its staff, the information furnished by the is	the undersigned duly authorized person. If t issuer to furnish to the U.S. Securities and Ex	his notice is file schange Commi	ed under Rule 505, the ssion, upon written re-
ssuer (Print or Type)	Signature /	Date	<u> </u>
The Miami South Beach Limited Partnership	X Oune M'Varen	J	uly 13, 2005
lame of Signer (Print or Type)	Title of Signer (Print or Type)		
H. Bruce McClaren	PCHF Home Investors, Inc	·	

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)