

# 2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A00000001016

Entity Name: 1607 PONCE, LLLP.

FILED  
Feb 17, 2010  
Secretary of State

**Current Principal Place of Business:**

2199 PONCE DE LEON BLVD  
SUITE 500  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2199 PONCE DE LEON BLVD  
SUITE 500  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-1018432

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REISER, SHALOM  
2199 PONCE DE LEON BLVD  
SUITE 400  
CORAL GABLES, FL 33134 US

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

REISER, SHALOM  
2199 PONCE DE LEON BLVD  
SUITE 500  
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: SHALOM REISER

02/17/2010

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: REISER, SHALOM

Address: 2199 PONCE DE LEON BLVD, SUITE 500

City-St-Zip: CORAL GABLES, FL 33134

**ADDRESS CHANGES ONLY:**

Address:

City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: SHALOM REISER

GP

02/17/2010

Electronic Signature of Signing General Partner

Date