

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000120495

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** PONTE GADEA GABLES LLC

**Current Principal Place of Business:**

2701 LEJEUNE RD.  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2701 LEJEUNE RD.  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 20-8089010

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROJAS, ALINA  
270 BISCAYNE BOULEVARD WAY  
SUITE 201  
MIAMI, FL 33131 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** VP  
**Name:** ROJAS, ALINA L  
**Address:** 2701 LEJEUNE RD.  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** MGR  
**Name:** ARNAU SIERRA, JOSE  
**Address:** 2701 LEJEUNE RD.  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** MGR  
**Name:** CARRO MERCHAN, JAIME  
**Address:** 2701 LEJEUNE RD.  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** MGR  
**Name:** CIBEIRA MOREIRA, ROBERTO  
**Address:** 2701 LEJEUNE RD.  
**City-St-Zip:** CORAL GABLES, FL 33134

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** ALINA ROJAS

VP

01/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date