

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000087843

Entity Name: 3138-3190 PONCE, LLC

FILED  
Feb 06, 2011  
Secretary of State

**Current Principal Place of Business:**

3138-3190 PONCE DE LEON BOULEVARD  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3601 TOLEDO STREET  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

VASALLO & VASALLO, P.A.  
12394 S.W. 82 AVENUE  
PINECREST, FL 33156 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: MGRM  
Name: AJE 3138-3190 PONCE, LLC  
Address: 3601 TOLEDO STREET  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: ROUVIERE, SONYA J  
Address: 4025 UNIVERSITY DRIVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM  
Name: MAROON, SHIRLEY  
Address: 608 CADAGUA AVENUE  
City-St-Zip: CORAL GABLES, FL 33146

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: ALEXIS J. EHRENHAFT, TRUSTEE

MGRM

02/06/2011

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