

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000070448

**Entity Name:** PONCE RETAIL PARTNERS, LLC

**Current Principal Place of Business:**

2631 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2631 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134

**FEI Number:** 36-4612255

**Certificate of Status Desired:** No

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

PRAHL, JOHN J  
12376 SW 82ND AVENUE  
PINECREST, FL 33156 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name TRIA, BARBARA F  
Address 2631 PONCE DE LEON BLVD.  
City-State-Zip: CORAL GABLES FL 33134

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BARBARA TRIA

MANAGER

01/13/2014

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date