

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000082034

**Entity Name:** 410 PONCE, LLC

**Current Principal Place of Business:**

747 PONCE DE LEON BLVD.  
SUITE 410  
CORAL GABLES, FL 33134

**Current Mailing Address:**

747 PONCE DE LEON BLVD.  
SUITE 410  
CORAL GABLES, FL 33134

**FEI Number:** 27-3227473

**Certificate of Status Desired:** No

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

QUESADA, G. FRANK ESQ  
1313 PONCE DE LEON BLVD. SUITE 200  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	MACIA, SERGIO	Name	VILANOVA, SALVADOR
Address	747 PONCE DE LEON BLVD. STE 410	Address	747 PONCE DE LEON BLVD. STE 410
City-State-Zip:	CORAL GABLES FL 33134	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:** SERGIO MACIA

**MANAGER**

**03/24/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date