## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000112360

Entity Name: LA PONDEROSA, LLC

**Current Principal Place of Business:** 

6304 POWERLINE RD FT LAUDERDALE, FL 33309

**Current Mailing Address:** 

6304 POWERLINE RD

FT LAUDERDALE. FL 33309 US

FEI Number: 45-3782972 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**ACCOUNTANT & MANAGEMENT** 1549 NE 123RD ST NORTH MIAMI, FL 33161 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

**FILED** Mar 24, 2014

**Secretary of State** 

CC1797851441

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

URBANO, LILIANA EDITH Name TORRES, ANTONIO Name 1549 NE 123RD ST 1549 NE 123RD ST Address Address

City-State-Zip: NORTH MIAMI FL 33161 NORTH MIAMI FL 33161 City-State-Zip:

Title **MGRM** Title **MGRM** 

Name TORRES, FEDERICO A TORRES, LAURA ANDREA Name Address 1549 NE 123RD ST Address 1549 NE 123RD ST NORTH MIAMI FL 33161

City-State-Zip:

NORTH MIAMI FL 33161 City-State-Zip:

Title **MGRM** 

TORRES, MARCELA A Name 1549 NE 123RD ST Address

City-State-Zip: NORTH MIAMI FL 33161

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: TORRES ANTONIO **MNGR** Electronic Signature of Signing Authorized Person(s) Detail

03/24/2014

Date