

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000089373

**Entity Name:** PONCE STUDIO LLC

**Current Principal Place of Business:**

1300 PONCE DE LEON BLVD.  
UNIT 706  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1300 PONCE DE LEON BLVD.  
UNIT 706  
CORAL GABLES, FL 33134 US

**FEI Number:** 36-4917374

**Certificate of Status Desired:** No

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

ELAN BUSINESS SERVICES, CORP.  
1116 CEDAR FALLS DR  
WESTON, FL 33327 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:** SILVIA VILA

04/29/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |  |                 |  |
|-----------------|--|-----------------|--|
| Title           | AMBR   | Title           | AMBR   |
| Name            | ALBINO BARRERA, DOMINGO A                    | Name            | GARCIA DE ALBINO, MARY Y                     |
| Address         | AV VENEZUELA CLLE 7, OF 202, 2 PO,<br>ED INT | Address         | AV VENEZUELA CLLE 7, OF 202, 2 PO,<br>ED INT |
| City-State-Zip: | SAN ANTONIO ESTADO TACHIRA TA<br>5007        | City-State-Zip: | SAN ANTONIO ESTADO TACHIRA TA<br>5007        |

*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:** ALBINO BARRERA , DOMINGO A

AMBR

04/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date