SUBJECT: PONCE REALTY CORPORATION	
(Name of corporation - mu	ust include surfix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Florida", "Certificate of Existence", and check are su foreign corporation to transact business in Florida.	or Authorization to Transact Business in abmitted to register the above referenced when the following:
Please return all correspondence concerning this mat	ter to the following:
JUAN A. AQUINO (Name of Per	300001867008 -06/19/9601062001 ******70.00 ******70.00
PONCE REALTY CORPORATION (Firm/Compa	any)
РО ВОХ 71450	
Ditti Dollit, Lubita	736-1450 FEE 98
(City/State/Z Should you need to call someone concerning this mat	TARY OF
(Name of Person)	(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section

Division of Corporations

TO:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRE

Qualification/Tax I Division of Corpor P. O. Box 6327 Tallahassee, FL 3-

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PONCE REALTY CORPORATION	
(Name of corporation; must include the word "INCORPOR abbreviations of like import in language as will clearly indica person or partnership if not so contained in the name at pres	ATED", "COMPANY", "CORPORATION" or words or steethat it is a corporation instead of a natural ent.)
DELAWARE	3N/A
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. APRIL 29, 1996 (Date of Incorporation)	5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
, ,	
6. JULY 1996 (Date first transacted business in Florida. (SEE SECTIONS	607.1501.607.1502. AND 817.155. F.S.)
7. PONCE REALTY CORPORATION	
PO BOX 71450 SAN JUAN, PUERTO RIC	
(Current mailing	g address)
8. COMMERCIAL REAL ESTATE RENTAL ACTIV	
Purpose(s) of corporation authorized in home state or country Florida)	to be carried out in the state of
9. Name and street address of Florida registered acceptable) Name: MR. JOSEPH M. GUERRA	agent: (P.O. Box or Mail Drop Barrior)
Office Address: 150 ALHAMBRA CIRCLE, SUITE 90	<u> </u>
CORAL GABLES	, Florida ,
10. Registered agent's acceptance:	(Zip Code) 3-
Having been named as registered agent and to accept corporation at the place designated in this application registered agent and agree to act in this capacity. It all statutes relative to the proper and complete perform and accept the obligations of my position as registered agent. (Registered agent) 11. Attached is a certificate of existence duly authent delivery of this application to the Department of States.	on, I hereby accept the appointment as further agree to comply with the provisions of rmance of my duties) and I am familiar with ed agent. Signature)

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) JAIME FONALLEDAS-RUBERT, ESQ. Chairman: ... PALMERAS & JERONIMO STREETS Address: EL CARIBE BUILDING, 16TH FLOOR; SAN JUAN, PHERTO RICO, 00901 Vice Chairman:_____ Address: _ ELIAS R. ASON, PH.D. Director: PALMERAS & JERONIMO STREETS EL CARIBE BUILDING, LETH FLOOR; SAN JUAN, PUERTO RICO, 00901 Address: ___ Director: RAUL UBARRI-BENITEZ Address: EL CARIBE BUILDING, 16TH FLOOR; PALMERAS & JERONIMO STREETS SAN JUAN, PUERTO RICO 00901 B. OFFICERS (Street address only- P. O. Box NOT acceptable) JAIME FONALLEDAS-RUBERT, ESQ. President: EL CARIBE BUILDING, 16TH FLOOR; PALMERAS & JERONIMO STREETS Address: ___ SAN JUAN, PUERTO RICO 00901 Vice President: __ELIAS R. ASON, PH.D. EL CARIBE BUILDING, 16TH FLOOR; PALMERAS & JERONIMO STREETS Address: _ SAN JUAN, PUERTO RICO 00901 ELIAS R. ASON, PH.D. Secretary: EL CARIBE BUILDING, 16TH FLOOR; PALMERAS & JERONIMO STREETS Address: ___ AS N SAN JUAN, PUERTO RICO 00901 Treasurer: ___ELIAS R. ASON, PH.D. Address: FL CARIBE BUILDING, 16TH FLOOR; PALMERAS & JERONIMO STREETS SAN JUAN, PUERTO RICO 00901 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Elfas R. Asón, Ph.D., Vice President
(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAW.RE, DO HEREBY CERTIFY "PONCE REALTY CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF JUNE, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

96 JUN 18 PHI2: 50
SECRETARY OF STATE



Edward J. Freel, Secretary of State

AUTHENTICATION:

7977047

DATE:

06-07-96

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