

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010551

FILED
Apr 28, 2004
Secretary of State

Entity Name: PONCE DE LEON GROUP, LLC

Current Principal Place of Business:

3890 W. COMMERCIAL BLVD., SUITE 214
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

104 W. CHESTNUT
254
HILLSDALE, IL 60521 US

Current Mailing Address:

3890 W. COMMERCIAL BLVD., SUITE 214
FORT LAUDERDALE, FL 33309

New Mailing Address:

104 W. CHESTNUT
254
HILLSDALE, IL 60521 US

FEI Number: 65-1034240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PONCE DE LEON, ALONSO G
3892 W COMMERCIAL BLVD., SUITE 214
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

KING, MARK
5353 NORTH FEDERAL HIGHWAY
SUITE 207
FORT LAUDERDALE, FL 33308 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: MARK KING

04/28/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: PONCE DE LEON, ALONSO G
Address: 1825 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: PONCE DE LEON, IRERI R
Address: 1825 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: PONCE DE LEON, MARIA G
Address: 1825 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PONCE DE LEON, ALONSO G
Address: 104 W. CHESTNUT
City-St-Zip: HILLSDALE, IL 60521

Title: MGRM (X) Change () Addition
Name: PONCE DE LEON, IRERI R
Address: 104 W. CHESTNUT
City-St-Zip: HILLSDALE, IL 60521

Title: MGRM (X) Change () Addition
Name: PONCE DE LEON, MARIA G
Address: 104 W. CHESTNUT
City-St-Zip: HILLSDALE, IL 60521

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ALONSO PONCE DE LEON

MGRM

04/28/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date