


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 27, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000011139**

1. Entity Name  
**PONCE PARK INVESTMENTS LLC**



Principal Place of Business 2719 PONCE DE LEON BLVD CORAL GABLES, FL 33134	Mailing Address 2719 PONCE DE LEON BLVD CORAL GABLES, FL 33134
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**DO NOT WRITE IN THIS SPACE**



04222004No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1039919	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**ROGER BESU, P.A.**  
**1925 BRICKELL AVENUE, SUITE D-206**  
**MIAMI, FL 33129**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HIDALGO, OSCAR % 1925 BRICKELL AVE., SUITE D206 MIAMI, FL 33129
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**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** Oscar Hidalgo **4/22/04** **(305) 567-0060**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #