

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000040534

**FILED  
Apr 29, 2010  
Secretary of State**

**Entity Name:** 747 #607 PONCE DE LEON, LLC

**Current Principal Place of Business:**

C/O GLORIA LOPEZ  
12611 RAMIRO ST  
CORAL GABLES, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

C/O GLORIA LOPEZ  
12611 RAMIRO ST  
CORAL GABLES, FL 33156

**New Mailing Address:**

**FEI Number:** 52-2415767      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SQUIRES, GILBERT K ESQ.  
C/O GLORIA LOPEZ  
12611 RAMIRO ST  
CORAL GABLES, FL 33156 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LOPEZ, GLORIA M.D.  
Address: 12611 RAMIRO ST  
City-St-Zip: CORAL GABLES, FL 33156

I hereby 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: GL \_\_\_\_\_ MGR \_\_\_\_\_ 04/29/2010

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