2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

Feb 27, 2006 8:00 am **Secretary of State DOCUMENT # L05000024198** 02-09-2006 90149 035 ****50.00 1. Entity Name PONCE CIRCLE DEVELOPERS, L.L.C. Principal Place of Business Mailing Address 300011116 232 ANDALUSIA AVENUE, SUITE 300 232 ANDALUSIA AVENUE, SUITE 300 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02022006 CR2E083 (11/05) City & State 4. FEI Number 2162170 City & State Applied For Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YANOWITCH, PETER J ESQ 232 ANDALUSIA AVE, STE 350 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES, FL 33134 City Zip Code 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 Signature, typed or printed name of registered agent and tills if applicable (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. IIILE MGRM TITLE TREASURER Addition ☐ Defete Change SANCHEZ, RAFAEL A JORGEL. DOMINICIS NAME MAAR 232 ANDALUSIA AVENUE SUITE 300 STREET ADDRESS 232 ANDALUSIA AVENUE, SUITE 300 STREET ADDRESS CITY-ST-ZP CORAL GABLES, FL 33134 COLAL GAGE. PL 33134 CITY-ST-ZIP TITLE mue Delete ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BDF-Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE C Delete IIILE Change Addition | NAME HALLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete me ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP 11. I hereby certify that the information supplied with this filing does not obality for the exemptions contained in Chapter 119, 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.

FILED





Division of Corporations

February 13, 2006

PONCE CIRCLE DEVELOPERS, L.L.C. 232 ANDALUSIA AVENUE, SUITE 300 CORAL GABLES, FL 33134

Subject: PONCE CIRCLE-DEVELOPERS, L.L.C.

Reference Number:

L05000024198

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/MH ANNUAL REPORTS SECTION



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 13, 2006

GRG HOLDINGS, LLC 8603 S DIXIE HIGHWAY STE 208 MIAMI, FL 33143

Subject: GRG HOLDINGS, LLC

Reference Number:

L05000113090

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

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