

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026227

Entity Name: 3809 PONCE DE LEON, LLC

FILED
Mar 21, 2008
Secretary of State

Current Principal Place of Business:

2 GROVE ISLE DR., #1508
COCONUT GROVE, FL 33133

New Principal Place of Business:

7638 SW 54 AVE
MIAMI, FL 33143

Current Mailing Address:

2 GROVE ISLE DR., #1508
COCONUT GROVE, FL 33133

New Mailing Address:

7638 SW 54 AVE
MIAMI, FL 33143

FEI Number: 20-2658073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINTZ, LAWRENCE
2 GROVE ISLE DRIVE
#1508
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

MINTZ, LAWRENCE
7638 SW 54 AVE
MIAMI, FL 33143 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: LAWRENCE MINTZ

03/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MINTZ, LAWRENCE
Address: 2 GROVE ISLE DRIVE #1508
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: MGR () Delete
Name: CAMPBELL, MELISSA
Address: 2 GROVE ISLE DRIVE #1508
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: MGRM () Delete
Name: FAMILY PROPERTIES PA, RTNERSHIP
Address: 2 GROVE ISLE DRIVE #1508
City-St-Zip: COCONUT GROVE, FL 33133 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MINTZ, LAWRENCE
Address: P.O.BOX 330159
City-St-Zip: COCONUT GROVE, FL 33233 US

Title: MGR (X) Change () Addition
Name: CAMPBELL, MELISSA
Address: P.O.BOX 330159
City-St-Zip: COCONUT GROVE, FL 33233 US

Title: MGRM (X) Change () Addition
Name: FAMILY PROPERTIES PA, RTNERSHIP
Address: P.O.BOX 347410
City-St-Zip: CORAL GABLES, FL 33234 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LAWRENCE MINTZ

PRES

03/21/2008

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