

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100174

FILED
Jan 17, 2008
Secretary of State

Entity Name: PONTE GADEA DUPONT, LLC

Current Principal Place of Business:

1221 BRICKELL AVE
SUITE 1080
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1221 BRICKELL AVE
SUITE 1080
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-3756876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROJAS, ALINA L
1221 BRICKELL AVE
SUITE 1080
MIAMI, FL 33131 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 () Delete
Name: ARNAU SIERRA, JOSE
Address: AVENIDA DE LA DIPUTACION, S/N 15142 AREIXO
City-St-Zip: CORUNA ESPANA, SP SP

Title: MGR () Delete
Name: DIAZ-FREIJO CERECEDO, JULIO
Address: AVENIDA DE LA DIPUTACION, S/N 15142 AREIXO
City-St-Zip: CORUNA ESPANA, SP SP

Title: MGR () Delete
Name: CIBEIRA MOREIRA, ROBERTO
Address: AVENIDA DE LA DIPUTACION, S/N 15142 AREIXO
City-St-Zip: CORUNA ESPANA, SP SP

Title: VP () Delete
Name: ROJAS, ALINA L
Address: 1221 BRICKELL AVE SUITE 1080
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALINA ROJAS

VP

01/17/2008

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