

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056193

Entity Name: 2100 PONCE, LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

% JOHN H. RUIZ
5040 NW 7TH STREET SUITE 200
MIAMI, FL 33126

New Principal Place of Business:

% JOHN H. RUIZ
5040 NW 7TH STREET SUITE 632
MIAMI, FL 33126

Current Mailing Address:

% JOHN H. RUIZ
5040 NW 7TH STREET SUITE 200
MIAMI, FL 33126

New Mailing Address:

% JOHN H. RUIZ
5040 NW 7TH STREET SUITE 632
MIAMI, FL 33126

FEI Number: 20-8495001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RUIZ, JOHN H
2100 PONCE DE LEON BLVD., STE. 700
CORAL GABLES, FL 33134 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: RUIZ, JOHN H
Address: 5040 NW 7TH STREET SUITE 200
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: GONZALEZ, CARLOS
Address: 2100 PONCE DE LEON BLVD., STE. 700
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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: JOHN RUIZ

MGR

05/01/2008

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