## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L9400000380

Entity Name: PONCE DE LEON PROPERTIES, L.C.

FILED Mar 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3191 CORAL WAY # 1008 MIAMI, FL 33145

Current Mailing Address: New Mailing Address:

3191 CORAL WAY # 1008 MIAMI, FL 33145

FEI Number: 65-0521646 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SOSTCHIN, GUILLERMO ESQ. SOSTCHIN, HENRIETTA 3191 CORAL WAY,# 1008 3191 CORAL WAY,# 1008 MIAMI, FL 33145 US MIAMI, FL 33145 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: HENRIETTA SOSTCHIN 03/06/2009

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SOSTCHIN, GUILLERMO
 Name:

 Address:
 3191 CORAL WAY, # 1008
 Address:

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SOSTCHIN, HÉNRIETTA
 Name:

 Address:
 3191 CORAL WAY, # 1008
 Address:

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 VIVES, GRACE
 Name:

 Address:
 3191 CORAL WAY, # 1008
 Address:

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 STONE, DAVID E
 Name:

 Address:
 12555 BISCAYNE BLVD.
 Address:

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 PERCAL, ENRIQUE
 Name:

 Address:
 2300 LAKE AVE., SUNSET ISLE #3
 Address:

 City-St-Zip:
 MIAMI, FL
 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: GRACE VIVES MGRM 03/06/2009