2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State
04-25-2005 90279 024 ***150.00

DOCUMENT # P02000059466

1. Entity Name
PONCE RESTAURANTS, INC.

Principal Place of Business	Mailing Address
25 SE 2ND AVE STE 900 MIAMI, FL 33131	25 SE 2ND AVE SUITE 900 MIAMI, FL 33131

2. Principal Place of Business	3. Mailing Address
Two Alhambra Plaza	Two Alhambra Plaza
Suite, Apt. #, etc.: Penthouse 1B	Suite, Apt. #, etc.: Penthouse 1B
City & State: Coral Gables, Fl.	City & State: Coral Gables, Fl.
Zip: 33134 Country: USA	Zip: 33134 Country: USA

01192005 Chg-P CR2E034 (10/03)

4. FEI Number 22-3858633 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MURAI WALD BIONDO & MORENO, P.A. 25 SE 2ND AVE STE 900 MIAMI, FL 33131	Name: Murai Wald Biondo Moreno & Brochin, P.A. Street Address (P.O. Box Number is Not Acceptable): Two Alhambra Plaza Penthouse 1B City: Coral Gables FL Zip Code: 33134

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 _____ 4/4/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D NAME: ORTIZ, JOSE STREET ADDRESS: C/O MURAI WALD 25 SE 2ND AVE #900 CITY-ST-ZIP: MIAMI, FL 33131	☐ Delete	TITLE: D NAME: ORTIZ, JOSE STREET ADDRESS: Two Alhambra Plaza, Penthouse 1B CITY-ST-ZIP: Coral Gables, Fl. 33134	☒ Change ☐ Addition
TITLE: P NAME: CENTURION, CARLOS STREET ADDRESS: 25 SE 2ND AVE STE 900 CITY-ST-ZIP: MIAMI, FL 33131	☐ Delete	TITLE: P NAME: Centurion, Carlos STREET ADDRESS: Two Alhambra Plaza, Penthouse 1B CITY-ST-ZIP: Coral Gables, Fl. 33134	☒ Change ☐ Addition
TITLE: VP NAME: ORTIZ, JOSE STREET ADDRESS: 25 SE 2ND AVE STE 900 CITY-ST-ZIP: MIAMI, FL 33131	☐ Delete	TITLE: VP NAME: ORTIZ, JOSE STREET ADDRESS: Two Alhambra Plaza, Penthouse 1B CITY-ST-ZIP: Coral Gables, Fl. 33134	☒ Change ☐ Addition
TITLE: AS NAME: MURAI, RENE STREET ADDRESS: 25 SE 2ND AVE STE 900 CITY-ST-ZIP: MIAMI, FL 33131	☐ Delete	TITLE: AS NAME: Murai, Rene STREET ADDRESS: Two Alhambra Plaza, Penthouse 1B CITY-ST-ZIP: Coral Gables, Fl. 33134	☒ Change ☐ Addition
TITLE: SEC NAME: ORTIZ, JOSE STREET ADDRESS: 25 SE 2ND AVE STE 900 CITY-ST-ZIP: MIAMI, FL 33131	☐ Delete	TITLE: SEC NAME: ORTIZ, JOSE STREET ADDRESS: Two Alhambra Plaza, Penthouse 1B CITY-ST-ZIP: Coral Gables, Fl. 33134	☒ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Rene V. Murai, AS 2/4/05 305-444-0101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #