

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000072158

FILED
Jan 13, 2008
Secretary of State

Entity Name: PONCE ENTERTAINMENT, INC.

Current Principal Place of Business:

6 GRANADA STREET
ST AUGUSTINE, FL 32084

New Principal Place of Business:

4 GRANADA STREET
ST AUGUSTINE, FL 32084

Current Mailing Address:

6 GRANADA STREET
ST AUGUSTINE, FL 32084

New Mailing Address:

P.O. BOX 528
ST AUGUSTINE, FL 32085

FEI Number: 26-0393721

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PONCE, JR., CHARLES F
6 GRANADA STREET
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

PONCE, JR., CHARLES F
4 GRANADA STREET
ST AUGUSTINE, FL 32084 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:

01/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PONCE, JR., CHARLES F
Address: 6 GRANADA STREET
City-St-Zip: ST AUGUSTINE, FL 32084

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PONCE, JR., CHARLES F
Address: 348 ST. GEORGE AVENUE
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VP () Change (X) Addition
Name: SANDRA, CRAIG
Address: 1753 SANTANDER STREET
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: T () Change (X) Addition
Name: PONCE, KAREN
Address: 348 ST. GEORGE AVENUE
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: S () Change (X) Addition
Name: PONCE, KAREN
Address: 348 ST. GEORGE AVENUE
City-St-Zip: ST. AUGUSTINE, FL 32084

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN PONCE

S

01/13/2008

Electronic Signature of Signing Officer or Director

Date