

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33657

FILED
Apr 30, 2009
Secretary of State

Entity Name: INVERSIONES PONCE S.A.

Current Principal Place of Business:

% OCEAN BANK ATTN: NABEL POZA
1000 BRICKELL AVE, 1200
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

% OCEAN BANK ATTN: NABEL POZA
1000 BRICKELL AVE, 1200
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0328509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ MORO, ISABEL
C/O OCEAN BANK- ATTN: NABEL POZA
1000 BRICKELL AVENUE - SUITE 1200
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DIAZ-MORO, ISABEL
Address: 7050 SW 86TH AVE
City-St-Zip: MIAMI, FL 33143

Title: TD () Delete
Name: DIAZ-MORO, FRANCISCO
Address: 7050 SW 86TH AVE
City-St-Zip: MIAMI, FL 33143

Title: DS () Delete
Name: DIAZ-MORO, LUISA F.
Address: 7050 SW 86TH AVE
City-St-Zip: MIAMI, FL 33143

Title: DVP () Delete
Name: DIAZ-MORO, CEFERINO
Address: 7050 SW 86TH AVE
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ISABEL DIAZ-MORO

DP

04/30/2009

Electronic Signature of Signing Officer or Director

Date