


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000093762 1. Entity Name PONCE HOLDING CORPORATION	
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Principal Place of Business 10720 SW 69 COURT MIAMI, FL 33156	Mailing Address 10720 SW 69 COURT MIAMI, FL 33156
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04232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0717661	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**MCMAHON, PAUL J P.A
THE WISEHEART BUILDING
2840 SW THIRD AVE.
MIAMI, FL 33129**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GOLDMAN, ANN R 10720 SW 69 COURT MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PANKEY, NANCY R 183 CARROLL ST ISLAMORADA, FL 33036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MCMAHON, MARGARET 1040 VALENCIA CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP ROBERTS, WILLIAM 3540 RESERVOIR ROAD NW WASHINGTON, DC 20007
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

UD00000926886
05/16/08-80052-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Ann R Goldman* ANN R GOLDMAN 4/24/08 305-665-1074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #