2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-7IP

Jul 19, 2007 8:00 am Secretary of State DOCUMENT # V02601 1. Entity Name 07-19-2007 90024 042 ***150.00 4125 PONCE, INC. Principal Place of Business Mailing Address 5340 RIVIERA DR 5340 RIVIERA DR -CORAL GABLES, FL 33146 CORAL GABLES, FL 33146 US 07052007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0302143 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARIUTTO, DONALD V. DO NOT WRITE 5340 RIVIERA DR CORAL GABLES, FL 33146 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 14, 2007 10. OFFICERS AND DIRECTORS TITLE DP MARIUTTO, DONALD V NAME 5340 RIVIERA DR STREET ADDRESS CORAL GABLES, FL 33146 CITY-ST-ZIP DS TITLE MARIUTTO, EUGENE I NAME 7925 SW 69TH TERR STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33143 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITI F NAME STREET ADDRESS

FILED

changed, or on an attachment with an address, with all other like empowered 305) 663-98 72

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

2007 FOR PROFIT CORPORATION ANNUAL REPORT

ORIGINAL PEPORT FILED
3/16/07

	ANNOAL	KLI OKI		<u> </u>			
DOCUI 1. Entity Nam 4125 PON		•			TACHMEN	17	
Principal Place		Mailing Address 5340 RIVIERA DR					
	ES, FL 33146 US	CORAL GABLES, FL 33146	US	11517	7/ 200	4	
				HUIC	\$6059		
D	O NOT WRITE	CE	01292007 N	lo Chg-P CR2E	034 (11/05) Applied For		
				65-030214	3	Not Applicat	
	6 Name and Address of Courses D		· · · · · · · · · · · · · · · · · · ·	5. Certificate of Sta	atus Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current R	едізтегец Аделіт	 			_	
MARIUTTO, DONALD V. 5340 RIVIERA DR CORAL GABLES, FL 33146				DO NOT WRITE			
			IN THIS SPACE				
R. The phone	named entity submits this statement for	the surgeon of changing its register	rad allica as ragista	rod agast or both in	the Clate of Elevide I as	n familiar with and access	
	ions of registered agent.	ine purpose or changing no register	ed office of register	ed agent, or soun, and	the Sigle of Lorida. Tan	irramiliar with, and accept	
SIGNATURE_	Signature, hyped or printed name of registered agent an	d title if applicable. (NOTE; Registere	ed Agent signature required	l when roinstating)	DATE		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Stection Campaign Final Trust Fund Contribution.		.00 May Be ed to Fees			
10.	OFFICERS AND D	IRECTORS	<u> </u>				
title Name	DP MARIUTTO, DONALD V		1				
STREET ADDRESS	5340 RIVIERA DR		j				
CITY-ST-ZIP	DS CORAL GABLES, FL 33146		4				
NAME	MARIUTTO, EUGENE I		l				
STREET ADDRESS	7925 SW 69TH TERR MIAMI, FL 33143						
TITLE			1				
NAME STREET ADDRESS					OT MOIT	_	
CITY-ST-ZIP				DO N	OT WRIT	ᆫ	
TITLE NAME			1	IN TH	IIS SPAC	E	
STREET ADDRESS							
CITY-ST-ZIP			4				
TITLE NAME							
STREET ADDRESS							
CITY-ST-ZIP			1				
11144	,		_				

Lee neut page for segnature, date & sphone

NAME STREET ADDRESS CITY+ST-ZIP

^{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 is changed, or on an attachment with an address, with all other like empowered.

ATTACHMENT

•		•	•			MIMU	LIMIE	141	
I. Entity Nan	MEN I # V0260) ne NCE, INC.								
5340 RIVIERA DR 5		Mailing Address 5340 RIVIERA DR CORAL GABLES, FL 33146	US		40	1266	94 ··		
<u> </u>	OO NOT WRITE	IN THIS SPA	CE		01292007 4. FEI Numb 65-036	No Chg-P CR2		E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent	_						
MARIUTTO, DONALD V. 5340 RIVIERA DR CORAL GABLES, FL 33146						NOT W THIS SI			
3. The above the obligat 3IGNATURE_	named entity submits this statement for tions of registered agent. Scholure, typed or printed name of registered agent and		ered office or req			oth, in the State of F	Porida. Lan	n lamiliar with, and accep:	
	E NOWILL FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	S. Election Campaign Fine Trust Fund Contribution			00 May Be ed to Fees		<u></u>	· · · · · · · · · · · · · · · · · · ·	
10.	OFFICERS AND D	RECTORS				<u> </u>			
TITLE AME STREET ADDRESS STIT-ST-ZIP TITLE AME STREET ADDRESS XIY-ST-ZIP	DP MARIUTTO, DONALD V 5340 RIVIERA DR CORAL GABLES, FL 33146 DS MARIUTTO, EUGENE I 7925 SW 69TH TERR MIAMI, FL 33143								
HITLE STREET ADDRESS CITY-ST-ZIP RITLE NAME						NOT V THIS S			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME									
STREET ADDRESS			1						

Enmarathe

CITY-ST-ZIP

3/16/07 (305) 663-987=

^{12.} I hereby certify that the information supplied with this fitting 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.

ATTACHMENT HOLDED

ATTACHMENT HOLDED

Doe # VOJGOI-JOOTAR 2216

4125 PONCE, INC.
4573 PONCE DE LEON
CORAL GABLES, FL 33146

DATE DOOR 16, DOOG

PLY TO THE ORDER OF PLANE A STATE \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a Dipportment of State \$ 150. CE

Che Dendra a

ATTACHMENT

Donald V. Mariutto 5340 Riviera Drive

Coral Gables, Florida 33146

July 11, 2007

Florida Department of State Division of Corporations P.O. Box 6198 Tallahassee, FL 32314

Re: 4125 Ponce Inc.,

2007 For Profit Corporation Annual Report

Gentlemen:

Enclosed is our check in the amount of \$150.00. On March 16, 2007, we previously sent our 2007 For Profit Corporation Annual Report form along with our check for \$150 (copies enclosed). We never received any notification that you did not receive it. Apparently, it was either lost in the mail or is on someone's desk. After checking with our bank, we found that the check has not been cashed.

Since we have a history of always filing our report on time as we did with this filing, we request that the penalty of \$400.00 be waived.

Thank you for your consideration in this matter.

Very truly yours,

Donald V. Mariutto

Dvm/kwm Enc.

Registered Mail