

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000007181

**Entity Name:** PONCE-SILVA & ASSOCIATES, INC

**Current Principal Place of Business:**

2853 EXECUTIVE PARK DRIVE  
SUITE 105  
WESTON, FL 33331

**FILED**  
**Apr 29, 2016**  
**Secretary of State**  
**CC2304321898**

**Current Mailing Address:**

2853 EXECUTIVE PARK DRIVE  
SUITE 105  
WESTON, FL 33331 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MAS FINANCIAL GROUP, INC  
2853 EXECUTIVE PARK DRIVE  
SUITE 105  
WESTON, FL 33331 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            D/P  
Name            PONCE, GUILLERMO  
Address        1726 VICTORIA POINT CIRCLE  
City-State-Zip: WESTON FL 33327

Title            D  
Name            PONCE, BEATRIZ  
Address        1726 VICTORIA POINT CIRCLE  
City-State-Zip: WESTON FL 33327

*I hereby 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 all other like empowered.*

**SIGNATURE: GUILLERMO PONCE**

**D**

**04/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date