

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000012860

**Entity Name:** PONCE'S ENTERPRISE CORP.

**Current Principal Place of Business:**

18467 NW 52 PATH  
MIAMI GARDENS, FL 33055

**Current Mailing Address:**

18467 NW 52 PATH  
MIAMI GARDENS, FL 33055 US

**FEI Number:** 46-1986967

**Certificate of Status Desired:** No

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

PONCE, JENIELEY E  
18467 NW 52 PATH  
MIAMI GARDENS, FL 33055 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 P  
Name PONCE, JENIELEY E  
Address 18467 NW 52 PATH  
City-State-Zip: MIAMI GARDENS FL 33055

Title VP  
Name PONCE, BILLY  
Address 18467 NW 52 PATH  
City-State-Zip: MIAMI GARDENS FL 33055

*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:** JENIELEY PONCE

**PRESIDENT**

**03/11/2015**

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

\_\_\_\_\_  
Date