

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000100776

**Entity Name:** PONCE SCREEN ENCLOSURE INC

**Current Principal Place of Business:**

8515 NW 30 PL  
MIAMI, FL 33147

**Current Mailing Address:**

8515 NW 30 PL  
MIAMI, FL 33147

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

PONCE, YOSMAN  
8515 NW 30 PL  
MIAMI, FL 33147 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, YOSMAN  
Address 8515 NW 30 PL  
City-State-Zip: MIAMI FL 33147

*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:** YOSMAN PONCE

PONCE SCREEN  
ENCLOSURE INC

06/24/2018

Electronic Signature of Signing Officer/Director Detail

Date