

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034202

Entity Name: 747 PONCE DE LEON, LLC

Current Principal Place of Business:

747 PONCE DE LEON, SUITE 502
CORAL GABLES, FL 33134

Current Mailing Address:

747 PONCE DE LEON, SUITE 502
CORAL GABLES, FL 33134

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAGGIOLO, LUIS F
747 PONCE DE LEON, SUITE 502
CORAL GABLES, FL 33134 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

Authorized Person(s) Detail :

Title MGRM
Name MAGGIOLO, LUIS F
Address 747 PONCE DE LEON BLVD STE 502
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name MAGGIOLO, ANA MARIA
Address 747 PONCE DE LEON BLVD STE 502
City-State-Zip: CORAL GABLES FL 33134

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS F. MAGGIOLO,M.D>

MGRM

01/18/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date