## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000039707

Entity Name: PONCE 1005, LLC

**Current Principal Place of Business:** 

2121 PONCE DE LEON BLVD SUITE 1050

CORAL GABLES, FL 33134

## **Current Mailing Address:**

2121 PONCE DE LEON BLVD SUITE 1050 CORAL GABLES, FL 33134 US

FEI Number: 27-2343326 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CAPRIO, ALDO 7950 NW 53RD STREET STE 337 MIAMI, FL 33166 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: ALDO CAPRIO 04/01/2015

Electronic Signature of Registered Agent

Date

FILED Apr 01, 2015

**Secretary of State** 

CC1377225032

## Authorized Person(s) Detail:

Title MGRM

Name CAPRIO PAIOLA, ALDO

Address 2121 PONCE DE LEON BLVD SUITE

1050

City-State-Zip: CORAL GABLES FL 33134

SIGNATURE: ALDO CAPRIO PAIOLA

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

04/01/2015

Date