

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000150353

**Entity Name:** PONCE CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

1700 NW 106 AVE.  
PEMBROKE PINES, FL 33026

**Current Mailing Address:**

1700 NW 106 AVE.  
PEMBROKE PINES, FL 33026

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

HARRELL AND ASSOCIATES LLC  
11460 SW 20 STREET  
MIRAMAR, FL 33025 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            PRESIDENT  
Name            PONCE, SHEREE M  
Address        1700 NW 106 AVE.  
City-State-Zip:    PEMBROKE PINES FL 33026

Title            VP  
Name            REED, MARIAN  
Address        1700 NW 106 AVE.  
City-State-Zip:    PEMBROKE PINES FL 33026

*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.*

**SIGNATURE:** SHEREE PONCE

**PRESIDENT**

**04/27/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date