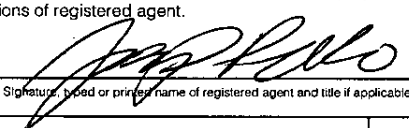
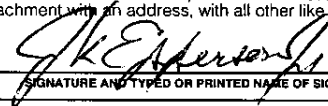


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2004 8:00 am
Secretary of State

02-13-2004 90009 045 ****61.25

DOCUMENT # 725117 1. Entity Name LEEWARD POINT CONDOMINIUM INC					
Principal Place of Business C/O HORIZON MAIN SERVICES 3211 N 74TH AVE HOLLYWOOD, FL 33021 US			Mailing Address C/O HORIZON MAIN SERVICES 3211 N. 74TH AVE HOLLYWOOD, FL 33021 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 59-1675853				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CAM, JOSEPH PECKO 3211 N. 74TH AVENUE SUITE 1 HOLLYWOOD, FL 33024				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 5618 Hollywood Blvd City Hollywood FL Zip Code 33021	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  2/10/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2004			9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	TD			TITLE	☐ Change ☐ Addition
NAME	BARAZ, IRA ☐ Delete			NAME	
STREET ADDRESS	16463 NW 27 PLACE			STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160			CITY-ST-ZIP	
TITLE	D			TITLE	☐ Change ☐ Addition
NAME	ANTONIO, MARK ☒ Delete			NAME	
STREET ADDRESS	2811 NE 164TH STREET			STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160			CITY-ST-ZIP	
TITLE	P			TITLE	☒ Change ☐ Addition
NAME	EPPERSON, JACK ☐ Delete			NAME	
STREET ADDRESS	2785 NE 165 TERR			STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160			CITY-ST-ZIP	
TITLE	SD			TITLE	☒ Change ☐ Addition
NAME	ROJAS, TONY ☒ Delete			NAME	
STREET ADDRESS	16478 NE 27TH PLACE			STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160			CITY-ST-ZIP	
TITLE	VP			TITLE	☒ Change ☐ Addition
NAME	BOBSON, BILL ☐ Delete			NAME	
STREET ADDRESS	16471 NE 27 PLACE			STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160			CITY-ST-ZIP	
TITLE				TITLE	☐ Change ☒ Addition
NAME	☐ Delete			NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  J.K. Epperson, Jr. Pres 2/11/04 (305) 592-7888 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					