2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000420

Entity Name: SILVER GARDENS CONDOMINIUM ASSOCIATION, INC.

FILED Sep 13, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10023 W. OKEECHOBEE RD., SUITE 201 7750 WEST 26TH AVE HIALEAH GARDENS, FL 33061

HIALEAH, FL 33016

Current Mailing Address: New Mailing Address:

P.O. BOX 160718 10011 W. OKEECHOBEE RD. #102

HIALEAH G, FL 33016 HIALEAH, FL 33016 US

FEI Number: 65-0480644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FERNANDEZ-OCHA, JOSEPHINE FLORIDA'S PROPERTY MGMT GROUP

10101 W. OKEECHOBEE RD., APT. 10101 P.O. BOX 160718 US

HIALEAH GARDENS, FL 33016 HIALEAH, FL 33016

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: ORLANDO FERRO 09/13/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition CHAVIANO, ARNALDO ZAYAS, RAMON Name: Name:

10011 W OKEECHOBEE RD., #102 Address: P.O. BOX 160718 Address: HIALEAH, FL 33016 City-St-Zip: HIALEAH GARDENS, FL 33016 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

LUCIA, HERI NO Name: TOVAR, JOSE J Name: Address: 10011 W. OKEECHOBEE RD. #102 Address: P.O. BOX 160718 City-St-Zip: HIALEAH GARDENS, FL 33016 US City-St-Zip: HIALEAH, FL 33016 US

TD

Title: () Delete Title: (X) Change () Addition PUENTE, ELIZABETH Name: ALVAREZ, JEAN Name:

10017 W. OKEECHOBEE RD. #102 Address: Address: P.O. BOX 160718 City-St-Zip: HIALEAH GARDENS, FL 33016 City-St-Zip: HIALEAH, FL 33016

Title: PD () Delete Title: SD (X) Change () Addition

Name: RAHON, ZAYAS Name: DOMINGUEZ, MIGDALIA 10023 W. OKEECHOBEE RD., SUITE 201 Address: Address: P.O. BOX 160718 City-St-Zip: HIALEAH GARDENBS, FL 33016 City-St-Zip: HIALEAH, FL 33016

Title: () Delete Title: () Change (X) Addition

ESPERON, SARA Name: Name: P.O. BOX 160718 Address: Address: HIALEAH, FL 33016 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMON ZAYAS PD 09/13/2004