

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 28, 2005
Secretary of State

DOCUMENT# N97000000420

Entity Name: SILVER GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7750 WEST 26TH AVE
4
HIALEAH, FL 33016 US

New Principal Place of Business:

7750 WEST 26TH AVE
SUITE 4
HIALEAH, FL 33016 US

Current Mailing Address:

P.O. BOX 160718
HIALEAH, FL 33016 US

New Mailing Address:

FEI Number: 65-0480644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FLORIDA'S PROPERTY MGMT GROUP
P.O. BOX 160718
HIALEAH, FL 33016 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: ORLANDO FERRO

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ZAYAS, RAMON
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD () Delete
Name: TOVAR, JOSE J
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016 US

Title: VPD (X) Change () Addition
Name: NEIRA, DIOSMIN
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016 US

Title: TD () Delete
Name: ALVAREZ, JEAN
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Delete
Name: DOMINGUEZ, MIGDALIA
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016

Title: SD (X) Change () Addition
Name: TORRES, JAQUELINE
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016

Title: D () Delete
Name: ESPERON, SARA
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016

Title: D (X) Change () Addition
Name: SORVI, NELSON
Address: P.O. BOX 160718
City-St-Zip: HIALEAH, FL 33016

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

09/28/2005

Electronic Signature of Signing Officer or Director

Date