2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# 205004

Entity Name: HILLSBORO MILE OCEAN APARTMENTS SECTION 4, INC.

Current Principal Place of Business:

1039 HILLSBORO MILE
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

PO BOX 8686
DEERFIELD BEACH, FL 33443

New Mailing Address:

FEI Number: 59-1000923 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORALES, CHARLES M
40 SE 5TH STREET
SUITE 401
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

MORALES, CHARLES M
33 S E 7TH STREET,
SUITE N
BOCA RATON, FL 33432 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: 04/27/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: CRISTENPELD, FRED
Address: 1039 HILLSBORO MILE APT. 23
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: PD ( ) Delete
Name: WATKINS, RICHARD
Address: 1039 HILLSBORO MILE APT 12
City-St-Zip: POMPANO BEACH, FL 33062

Title: SD ( ) Delete
Name: MORELL, RITA
Address: 1039 HILLSBORO MILE, #9
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: VPD ( ) Delete
Name: ROBERTS, J
Address: 1039 HILLSBORO MILE APT. 11
City-St-Zip: HILLSBORO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: MORRELL, RITA
Address: 1039 HILLSBORO MILE, #9
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: ( ) Change ( ) Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RITA MORRELL SD 04/27/2004
Electronic Signature of Signing Officer or Director — Date