FROM : SIERRA RIDGE POA FAX NO. : 305 652 1413

FILED
Apr 22, 2004 8:00 am
Secretary of State
04-22-2004 90075 003 ****61.25

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000004077

1. Entity Name
SIERRA RIDGE CONDOMINIUM K ASSOCIATION, INC.

Principal Place of Business	Mailing Address
THE CONTINENTAL GROUP 2950 N 28TH TERRACE HOLLYWOOD, FL 33020	THE CONTINENTAL GROUP 2950 N. 28TH TERRACE HOLLYWOOD, FL 33020

2. Principal Place of Business	3. Mailing Address
Suite Apt #, etc	Suite, Apt #, etc
City & State	City & State
Zip / Country	Zip / Country

04082004 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0849796 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STANTON, RICHARD TWO ALHANBRA PLAZA SUITE 508 CORAL GABLES, FL 33134	Name: The Law Offices of Katzman + Korr Street Address (P.O. Box Number is Not Acceptable): 5581 W. Oakland Park Blvd. 2nd Floor City: Lauderhill, FL Zip Code: 33313

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: Ferren L. Korr 04/16/04
Signature, Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MOHAMMED, RENA 850 N.E. 212TH TERRACE #4 N. MIAMI BEACH, FL 33179	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BUTTENDORF, RUTH 850 N.E. 212TH TERRACE, #1 N. MIAMI BEACH, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SD~~ PD AVHAD, VIRGILIA 840 N E 212TH TERRACE, #1 N. MIAMI BEACH, FL 33179	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: X Rena Avhad 4-14-04
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR Date Daytime Phone #