FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(8)

FILED Feb 07 1997 8:00am Secretary of State

OCUMENT # Corporation Name	H54503
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C.S.D.C., INC.

Principal Place of Business Mailing Address 4850 W OAKLAND PK BLVD 4850 W OAKLAND PK BLVD											
145		145					Į.				
	RDALE FL 33313		DALE FL 33313	3-7264							
US		US	U\$				3. Date Incorporated or Qualified 04/30/1985	ified 3a. Date of Last Report 03/12/1996			
- 2. Principal F	lace of Business	2a. Mailing 26	Address	·# 161			4. FEI Number 59-2544414			oplied For ot Applicabl	
Suite, Apt.	#, etc.		pt. #, etc.	***************************************			5. Certificate of Status Desired		\$8.75	Additional equired	
City & Stat	te	City & S	State				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country	Zip		Count	īν		8. This corporation has liability for				
24			29 30					Yes [. 100.002,	
	9. Name and Address of Cu			1001			10. Name and Address of New Registered Agent				
RRI	AN HART, ESQ			8	1	Name		.W			
	E S E THIRD AVE			<u> </u>	_	Charles & distant	10 C D N 1	-1-1			
	O SUNBANK INTERNATIONAL	CENTER		8	2	Street Addre	ss (P.O. Box Number is Not Acceptal	ole)			
	MI FL 33131			В	3						
****					_						
				8	4	City		FL	85 Zip	Code	
11. Pursuant office or agent. La	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the o	.0502 and 607.1508, state of Florida. Such bligations of, Section	Florida Statut change was a 607.0505, Flo	es, the abo authorized l orida Statut	by es	named corpo the corporation	oration submits this statement for the pon's board of directors. I hereby acce	ourpose o	f changing i	ts registerer registered	
SIGNATURE									,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Signature: type dor printed mone of registers		. (NOT		ger	nt signature required		DATE	DIDEATO	20 11 40	
12.	PST OFFICERS	AND DIRECTORS	DELETÉ	13.			ADDITIONS/CHANGES TO OFFIC	JERS ANI	Change	Additio	
TITLE	DAUER, EDWARD A.		FT nerelt	1.1 TITLE					L_1 Criange	L. Additio	
NAMÉ	5000 W OAKLAND PARK E	RI VA		1.2 NAM	_						
STREET ADDRESS	FORT LAUDERDALE FL	JL T U				ADDRESS					
CITY - S1 - ZIP	D CAUDENDALE PL		DELETE	1.4 CITY		i-ZIP			Change	Additio	
TITLE	, •		T DETE IE	2.1 TITLE					L.J Change	Additio	
NAME	DAUER, EDWARD A.	en en		2.2 NAM							
STREET ADDRESS	5000 W OAKLAND PARK E	OL YU				ADDRESS					
CITY - ST - ZIP	FORT LAUDERDALE FL		Driege	2. 4 CITY		1-ZIP		····	T 1 Ch	1 4220	
TIT; F		ļ	DELETE	3.1 TITLE					Change	☐ Additio	
NAME				3.2 NAM	_						
STREET ADDRESS	Į			3.3 STRE	ET.	ADDRESS					

6.4 CITY-ST-ZIP CITY-ST-7:P 14. I do 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 and cated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block with an address.

34. CITY-ST-ZIP

4.3 STREET ADDRESS 4.4 CITY-SY-ZIP

41 TITLE

4 2 NAME

51 TITLE

5.2 NAME **53 STREET ADDRESS**

6.1 TITLE

6.2 NAME 63 STREET ADDRESS

5.4 City-St-ZIP

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-Z-P

STREET ADDRESS

CITY-ST-7:P

TITLE NAME

TITLE

TITLE NAME

DELETE

DELETE

DELETE

Change

Change

Addition

Addition

___ Addition