

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # J67963		
1. Entity Name SYSTEMS DESIGN & DEVELOPMENT, INC.		
Principal Place of Business 800 A NORTHWEST 17TH AVENUE DELRAY BEACH, FL 33445 US		Mailing Address 800 A NORTHWEST 17TH AVENUE DELRAY BEACH, FL 33445 US
DO NOT WRITE IN THIS SPACE		
		01112006 No Chg-P CR2E034 (11/05)
		4. FEI Number 65-0027467
		Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
GRAU, RONALD J. 800 A NORTHWEST 17TH AVENUE DELRAY BEACH, FL 33445		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GRAU, RONALD J 800 A NORTHWEST 17TH AVENUE DELRAY BEACH, FL 33445	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	COO GALLO, DINA M 800 A NORTHWEST 17TH AVENUE DELRAY BEACH, FL 33445	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P TARRO, RON 800 A NORTHWEST 17TH AVENUE DELRAY BEACH, FL 33445	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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: <u>Ronald J. Grau</u> RONALD GRAU		01/13/06 561-276-7004 Date Daytime Phone #