AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 16, 1999 8:00 am Secretary of State 07-16-1999 90016 003 ***150.00

1999 DOCUMENT #

1. Corporation Name

Principal Plac	e of Business		Mailing	Address					FBEN DIRHI ARTIR BIRNI ALTIR 100)	
CLASSIC COURT 9050 CLASSIC COURT										
FL 32819			ORLANDO FL 32819							
LT US				S				DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified		
<u></u> _								06/03/1988		
2. Principal Place of Business			2a. Mailing Address					4. FEI Number	Applied For	
			26					_ 59-2093010	Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional	
···			27						Fee Required	
City & State			City & State					6. Election Campaign Financing	\$5.00 May Be	
<u> </u>			28					Trust Fund Contribution LJ Added to Fees		
Zip	Country				├ ──¬	Country		8. This corporation owes the current year		
24	25		29		30			Intangible Personal Property.	Yes No	
	9. Name and A	ddress of Currer	t Registere	d Agent		24	Name -	10. Name and Address of New Registered	Agent	
SAU	NDERS, J.L.					01	81 Name SAUNDERS J.L.			
						Street Addr	et Address (P.O. Box Number is Not Acceptable)			
9050 CLASSIC COURT					١		905	9050 Classic Court		
	ANDO FL 32819	•			83					
OND	MINDO FL 32019					84	City		85 Zip Code	
			1	1			"Oa	LANDU FL	85 Zip Code 32819	
11. Pursuan	t to the provisions of	ections 607 050	and 607.15	08, Florida Statute	s, the ab	ove-r	named comor	ration submits this statement for the nurnose of ch	anning its registered	
omce or agent. I	registered agant, of am familiar with, an	d agreet the oblig	ations of, sec	ouch change was a ction 807.0505. Flo	autnorizeo orida Stat	utes.	tne corporatio	on's board of directors. I hereby accept the appoi	niment as registered	
SIGNATURE			[[]][h	las				7/6	199	
Signature, types of winted name of egistered igent and title if applicable. (NOTE: Registered Agent signature							jent signature requ	ired when reinstating) DATE		
12.	<u></u>	OFFICERS AN	ID DIRECTO	RS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
TITLE	P			DELETE	1.1 TIT	LE			Change Addition	
NAME	Saunders, J.L				1.2 NA	ME	1		İ	
STREET ADDRESS	9050 CLASSIC				1,3 57	REETA	ADDRESS		1	
CITY-ST-ZIP	ORLANDO FL 3	2819			1.4 CI	ry-st-	ZIP			
TITLE	VP			DELETE	2.1 TIT	LE			Change Addition	
NAME	SAUNDERS, JAI	N			2.2 NA	ME	Ì			
STREET ADDRESS	9050 CLASSIC	Court	•		2.3 ST	REETA	ADDRESS			
CITY-ST-ZIP	ORLANDO FL 3	2819			2.4 CIT	Y-ST-	ZIP			
TITLE	}			DELETE	3.1 TIT	LE			Change Addition	
NAME					3.2 NA	ME.	Ì			
STREET ADDRESS]				3.3 ST	REETA	ADDRESS		[
CITY-ST-ZIP	{				3.4 CIT	Y-ST-Z	ZIP		Ì	
TITLE				DELETE	4.1 TIT	LE			Change Addition	
NAME	}				4.2 NA	ME				
STREET ADDRESS	ļ				4.3 STI	REETA	ADDRESS			
CITY-ST-ZIP	(4.4 CIT		- 1		ļ	
TITLE				DELETE	5.1 TIT			·—·—·	Change Addition	
NAME	Į				5.2 NA	ME	}			
STREET ADDRESS	j						ADDRESS			
CITY-ST-ZIP	Ì				5.4 CIT				Į.	
TITLE				DELETE	6.1 TIT				Change Addition	
NAME	{			T OFFE IE	6.2 NA				Change Addition	
STREET ADDRESS					R .		nnacce		ļ	
	l						DDRESS (
CITY-ST-ZIP	<u> </u>				6.4 CIT	۲-87-2	200			

14. 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 annual report or supplemental annual report is true and accurate another 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 employment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an oddress.

SIGNATURE:

CR2E034 (5/99)

T

SDB MANAGEMENT GROUP, INC. 9050 CLASSIC COURT ORLANDO, FLORIDA 32819

July 2, 1999

To Whom It May Concern:

Enclosed please find my application for renewal of the Annual Corporate Report for SDB Management Group, Inc.

As per my conversations with Leslie, I am forwarding a check in the amount of \$150.00 for the renewal, as I did not receive the 1st renewal notice.

Thank you for your consideration in this matter.

Sincerely,

J.L. Saunders, President

grant and controlled to the control of the first of the control of

· Leading and the second of t