

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L19115

1. Corporation Name
SDA ENTERPRISES, INC.

Principal Place of Business
777 S FLAGLER DRIVE
WEST TOWER, 14TH FLOOR
WEST PALM BEACH FL 33401
US

Mailing Address
222 LAKEVIEW AVE 777 S Flagler Dr
SUITE 1000 West Tower 14th Floor
WEST PALM BEACH FL 33401

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		33401	US

REINSTATEMENT 97-98

4. Date Incorporated or Qualified To Do Business in Florida	09/28/1989
5. FEI Number	65-0155154
Applied For	
Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
DPT	ABRAHAM, S. DANIEL	777 S FLAGLER AVE, WEST TOWER 14	WEST PALM BEACH FL
DS	STEINBERG, EDWARD L	777 S FLAGLER DRIVE, WEST TOWER	WEST PALM BEACH FL
CFO	TSANG, CARL	777 S FLAGLER DRIVE WEST TOWER 1	W PALM BEACH FL
			800002673178--8
			10/27/98 01033-010
			****908.75 ****908.75

8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City
State
Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent Vicky Goldstein VICKY GOLDSTEIN
SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN

Date 9-14-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☐

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Edward L Steinberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/14/98

Date

561-820-1320

Daytime Phone #

CR2E040 (8/97)