2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000099354

Address:

City-St-Zip:

6039 MULLIN STREET

JUPITER, FL 33458

FILED May 04, 2004 Secretary of State

Entity Name: SDI ENTERPRISES, INC. **Current Principal Place of Business: New Principal Place of Business:** 6039 MULLIN STREET JUPITER, FL 33458 **Current Mailing Address: New Mailing Address:** 6039 MULLIN STREET JUPITER, FL 33458 FEI Number: 65-1145681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOWDEN, C. WADE JONES FOSTER SERVICE, LLC C/O JONES, FOSTER, JOHNSTON & STUBBS, P.A. C/O JONES, FOSTER, JOHNSTON & STUBBS, P.A. 505 SOUTH FLAGLER DR., STE. 1100 505 SOUTH FLAGLER DR., STE. 1100 WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 US 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. SIGNATURE: DAVID E. BOWERS, MANAGER 05/04/2004 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete () Change () Addition DJAMIN, STEVE Name: Name: 6039 MULLIN STREET Address: Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: Title: Title: () Delete () Change () Addition SANDRIMAN, JUDITH Name: Name: 6039 MULLIN STREET Address: Address: JUPITER, FL 33458 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SILLS, VIRGINIA Name: Name: 6039 MULLIN STREET Address: Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: Title: () Delete Title: () Change () Addition DJAMIN, SILVA Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: STEVE DJAMIN PSD 05/04/2004