

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105630

FILED  
Apr 07, 2004  
Secretary of State

Entity Name: SDR SYSTEMS, INC.

## Current Principal Place of Business:

10349 BUENA VENTURA DRIVE  
BOCA RATON, FL 33498

## New Principal Place of Business:

## Current Mailing Address:

10349 BUENA VENTURA DRIVE  
BOCA RATON, FL 33498

## New Mailing Address:

FEI Number: 31-1810860

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCELROY, ROBERT PHD  
6971 N FEDERAL HWY  
SUITE 405  
BOCA RATON, FL 33487

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MCELROY, ROBERT DR.  
Address: 6971 NORTH FEDERAL HIGHWAY SUITE 405  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete  
Name: RUSSELL, MARY DR.  
Address: 10349 BUENA VENTURA DRIVE  
City-St-Zip: BOCA RATON, FL 33498

Title: D ( ) Delete  
Name: WALKER, SUSAN ESQ  
Address: 2255 GLADES RD S#324 ATRIUM PMB 1070  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: SUSAN WALKER

D

04/07/2004

Electronic Signature of Signing Officer or Director

Date