2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088366

Address:

City-St-Zip:

Entity Name: SDP INTERNATIONAL CORPORATION

FILED Feb 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14505 COMMERCE WAY **SUITE #700** MIAMI LAKES, FL 33016 **Current Mailing Address: New Mailing Address:** 14505 COMMERCE WAY 14505 COMMERCE WAY SUITE #700 SUITE #700 MIAMI LAKES, FL 33016 MIAMI LAKES, FL 33016 FEI Number: 54-2125131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CASANOVA, FRANCISCO J PRES. 14505 COMMERCE WAY SUITE # 700 MIAMI LAKES, FL 33016 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition CASANOVA, FRANCISCO J Name: Name: 14505 COMMERCE WAY SUITE # 700 Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: DIR. Title: () Delete () Change () Addition Name: MALLOY, NEIL J Name: 14505 COMMERCE WAY SUITE # 700 Address: Address: MIAMI LAKES, FL 33016 City-St-Zip: City-St-Zip: Title: Title: SEC. () Delete () Change () Addition MORRIS, BARBARA J Name: Name: 14505 COMMERCE WAY SUITE # 700 Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: DIR. () Delete Title: () Change () Addition MAZZEI, ORLANDO Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FRANCISCO J CASANOVA PRES 02/19/2008

14505 COMMERCE WAY SUITE # 700

MIAMI LAKES, FL 33016