

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Feb 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000023834 (1)

1. Corporation Name

S.D.G. & ASSOCIATES, INC.

Principal Place of Business

17096 NEWPORT CLUB DRIVE
BOCA RATON FL 33496

Mailing Address

17096 NEWPORT CLUB DRIVE
BOCA RATON FL 33496-3007



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/23/1995		3a. Date of Last Report 05/01/1996	
21 19580 DINNER KEY DR		26 19580 DINNER KEY DR		4. FEI Number 65-0572188		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23 BOCA RATON, FL		28 BOCA RATON, FL		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Zip Country		Zip Country					
24 33496 USA		29 33498 USA		10. Name and Address of New Registered Agent			
9. Name and Address of Current Registered Agent				81 Name			
GORDON, STEVEN D 17096 NEWPORT CLUB DRIVE BOCA RATON FL 33496				82 Street Address (P.O. Box Number is Not Acceptable) 19580 DINNER KEY DRIVE			
				83			
				84 City BOCA RATON			
				FL 85 Zip Code 33498			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON, STEVEN D	1.2 NAME	
STREET ADDRESS	17096 NEWPORT CLUB DRIVE	1.3 STREET ADDRESS	19580 DINNER KEY DRIVE
CITY-ST-ZIP	BOCA RATON FL 33496	1.4 CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, and that my signature shall have full 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 6, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: STEVEN D. GORDON, PRES. S.D.G. & ASSOCIATES, INC.

1/30/97

650083-5255

CR2E034 (9/96)