2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000083330

Entity Name: S.D. & M. INVESTMENTS, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

891 NW 109 TERRACE 1700 PARK LANE SOUTH CORAL SPRINGS, FL 33071 SUITE 6

JUPITER, FL 33458

Current Mailing Address: New Mailing Address:

P.O. BOX 770938

CORAL SPRINGS, FL 33077 US

FEI Number: 65-0624427 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:

SIMONIELLO, MICHAEL
891 NW 109 TERRACE
CORAL SPRINGS, FL 33071 US
SIMONIELLO, MICHAEL
1700 PARK LANE SOUTH
SUITE 6

JUPITER, FL 33458 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: MICHAEL SIMONIELLO 04/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS () Delete Title: DPS (X) Change () Addition

Name: SIMONIELLO, MICHAEL Name: SIMONIELLO, MICHAEL Address: 891 NW 109 TERRACE Address: 1700 PARK LANE SOUTH SUITE 6

City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: JUPITER, FL 33458

 $\label{eq:title:Title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf (X) \ Delete} \qquad {\sf Title:} \qquad {\sf (\) \ Change \ (\) \ Addition}$

 Name:
 SIMONIELLO, RALPH
 Name:

 Address:
 891 NW 109 TERRACE
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 SIMONIELLO, CAMILLA
 Name:

 Address:
 891 NW 109 TERRACE
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

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.

SIGNATURE: MICHAEL SIMONIELLO PRES 04/23/2007