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

PROFI1 **CORPORATION ANNUAL REPORT**

1998



H ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000097147 (8)

SDQ, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Place	e of Business		JIH BUILE 1917 1998 1721	† 84811 (881 1881				
328 NORTH N ORMOND BEA		328 NORTH NOVA ROAD ORMOND BEACH FL 3217	328 NORTH NOVA ROAD ORMOND BEACH FL 32174		DO NOT WRITI	E IN THIS SPACE		
					3. Date Incorporated or Qualified 11/25/1996		WARE 1 1888 BAR TOWN SET VIOLEN	
2. Principal Pr	ace of Business	2a. Mailing Address			4. FEI Number 59-3412985		Applied For Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	T	5 Additional Required	
City & State	0	City & State			6. Flection Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip Country 24 25		/φ [29]	Count 30	ťγ	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
LE-71	g. Name and Address of Current		201		10. Name and Address of New Re	gistered Agent		
901	HWARZ, CHERYL D		8	1 Name				
328 NORTH NOVA ROAD ORMOND BEACH FL 32174				82 Street Address (P.O. Box Number is Not Acceptable)				
) VN	MUND DEACH PE 32174		Ē	3				
			É	4 City		FL 85 7	ip Code	
office or re	to the provisions of Sections 607,0507 egistered agent, or both, in the State in familiar with, and accept the obliga	of Horida. Such change was a	uthorized	by the corpora	poration submits this statement for the tion's board of directors. I hereby acce	ourpose of changin pt the appointment	g its registered as registered	
SIGNATURE	Signature, typed or punted name of regulered ager	d and title d'applicable (NOT	Registered /	gent signature requ	ired when reinstaling)	DAII		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	ORS IN 12	
TITLE	PD	DELETE	1.1.11(1)			Chang		
NAME	SCHWARZ, RAYMOND R		1.2 NAM	ŀ				
STREET ADDRESS	4021 SEBRING COURT		1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	NEW SMYRNA BEACH FL 321	168	14 CITY	-ST-7IP				
TITLE	VSTD	□ DEFETE	21 HTL			☐ Chang	ge 🔲 Addition	
NAME	SCHWARZ, CHERYL D		2.2 NAM	E				
STREET ADDRESS	4021 SEBRING COURT		23 SIRI	ET ADDRESS				
CITY-ST-ZIP	NEW SMYRNA BEACH FL 321		2.4011	/-S1-ZIP				
TITLE		DETETE	3 1 THTL			L. Chang	ge 🔲 Addition	
NAME			3.2 NAM	E				
STREET ADDRESS			3 3 S I H	FT ADDRESS				
CHTY-ST-ZIP			3 4. CITY	-SI-7IP				
TALE		L_ DELETE	4.1 100	,		∟. Chanç	ge 🔲 Addition	
NAME			4. 2 NAN	SE .				
STREET ADDRESS			4.3 S1RE	FT ADDRESS				
CITY-ST-ZIP			4.4 City	-S1-7IP		~· ···		
TITLE		☐ DELETE	51700			Chang	ge L. Addition	
NAME			5 2 NAM	F				
STREET ADDRESS			5 3 S I R F	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY	- \$1 - 7 10'				
TATLE		DELITE	6.1 TITLE			∐ Chanç	ge L Addition	
NAME			6.2 NAM	[
STREET ADDRESS			6 3 STRE	E1 ADDRESS			ļ	
CITY-ST-ZIP			6.4 City	- S1 - ZIP		.,		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

11/1/00 Ball 12/21/11/