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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000098314 (2)

SDN COMPUTER CORP.

FILED
May 20 1998 8:00am
Secretary of State



		,			110 110 F 10 10 1	
Principal Plac	e of Business	Mailing Address				
2101 W COMMERCIAL BLVD 2101 W COMMERCIAL BLVD			VD			
SUITE 4100 FORT LAUDERDALE FL 33309		SUITE 4100 FORT LAUDERDALE FL 33309		DO NOT WRITE IN THIS SPACE		
FURI LAUDE	MDALE FL 33309	FORT ENODERDALE PL 30	3303	3. Date Incorporated or Qualified		
				11/17/1997		
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		APLIED FOR	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		58	75 Additional	
22		27		I S Continents of Status Desired	ee Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be		
23		28		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes or has paid the current ve	ar Intangible	
24	25		30	Personal Property Tax due June 30. Yes	□ No	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent		
FORMAN, ROBERT S			81 Name		:	
2101 W COMMERCIAL BLVD			82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 4100			<u> </u>			
FORT LAUDERDALE FL 33309			83			
			84 City	 85	Zip Code	
				orporation submits this statement for the purpose of change	,	
l office or i	registered agent, or both, in the State am familiar with, and accept the oblig Separate typist or point of coins of equational age	of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized by the corpo	oration's board of directors. I hereby accept the appointme	nt as registered	
12	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	CTORS IN 12	
TITLE	D	DELETE	1.1 TITLE	☐ Ch	ange 🔲 Addition	
NAME	ANDERES, KASPAR		1.2 NAME			
STREET ADDRESS	5030 CHAMPION BLVD UNIT	F-5	. 1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33496		1.4 CITY - ST - ZIP			
TITLE	ס	☐ DELETE	2.1 TITLE	∟ Ch	ange 🔲 Addition	
NAME	TROEGER, JORG		2.2 NAME			
STREET ADDRESS	9761 NW SARATOGA PARK	CT	2.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33428		2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE	∟ Ch	ange L_I Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	Ľ Ch	ange 🔲 Addition	
NAME			4. 2 NAME			
STREET ADDRESS			. 4.3 STREE1 ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP	TIA	nnos I Addition	
TITLE		☐ DELETE	5.1 TITLE	LJ Ch	ange Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		T of see	5.4 C(TY - ST - Z(P	Пен	ange Addition	
TITLE		☐ DELETE	6 1 TITLE	0 0000253199්ර් -05/21/9801085042	ange Lincolloil	
NAME			6 2 NAME		10 JO	
STREET ADDRESS			6.3 STREET ADDRESS	***150 . 00) 4/5	
COTY OT THE	1		6 4 CITY - ST - ZIP			

14. 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 information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation of 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.

ALLE CONTRACTOR OF THE PARTY OF

1.1.0.100

A ---