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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # S81214

## THE SDH CORPORATION

Mar 11, 1999 8:00 am Secretary of State 03-11-1999 90103 022 \*\*\*150.00



Principal Place of Business Mailing Address					, 100 HOLD 101 (014) (110 HOLD HOLD HOLD HOLD HOLD HOLD HOLD HOLD	in minn ninn ann.	,, e.e., 61641 (881
5250 TOWN CENTER CIR. STE. 109 BOCA RATON FL 33486		5250 TOWN CENTER CIR. STE. 109 BOCA RATON FL 33486		DO NOT WRITE IN THE	HIS SPACE		
US		US			09/19/1991		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21	26				65-0285488		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	е	City & State			6. Election Campaign Financing Trust Fund Contribution	•	May Be d to Fees
Zip	Country 25	Zip (29 30 30 )	Country		This corporation owes the current year     Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent	
LIALL	CED DONALD E		81	Name			
5868	GER, DONALD E. COLONY COURT		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
BOC	A RATON FL 33433		83	-			
			84	City	oration submits this statement for the purpose	·L.	p Code
agent. I a SIGNATURE	m familiar with, and accept the oblig	gations of, Section 607.0505, Florida S	statutes.		on's board of directors. I hereby accept the ap		
12.			13.		ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TORS IN 12
TITLE	D	☐ DELETE 1.1 TI				☐ Chang	e
NAME	HAUGER, DONALD E.	1	2 NAME				ļ
STREET ADDRESS	5868 COLONY COURT	1	.3 STREET	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		.4 CITY-ST	- ZIP		Chang	e Addition
TITLE	D CANDOA M	_	2,1 TITLE				,
NAME	HAUGER, SANDRA M. 5868 COLONY COURT		2.2 NAME	ADDRESS			
STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-S		and the second second		<del>,</del>
TITLE	BOOKINIONIE		3.1 TITLE	· <u>-</u>		Chang	e Addition
NAME		3	3.2 NAME				J
STREET ADDRESS		3	3.3 STREET	ADDRESS			1
CITY-ST-ZIP			3.4. CITY- 5	T-ZIP		Chang	ge Addition
TITLE			I.1 TITLE			L cliary	Je
NAME			I. 2 NAME	ADDRESS			
STREET ADDRESS			1.4 CITY-ST				j
CITY-ST-ZIP			5.1 TITLE			Chang	ge Addition
NAME		5	5.2 NAME				
STREET ADDRESS		5	5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST	r-ZIP			
TITLE			6.1 TITLE			Chang	ge Addition
NAME		j	5.2 NAME				ļ
STREET ADDRESS	, , , , , , , , , , , , , , , , , , ,	■ 6	3.3 STREET	ADDRESS			

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 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, with all other like empowered.

SIGNATURE: