SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # V48630

(0)

SD & D MANAGEMENT COMPANY NO. I INC.					
Principal Plac	e of Business	Mailing Address			
1111 LINCOLN RD. SUITE 500 MIAMI BEACH FL 33139		1111 LINCOLN RD. SUITE 500 MIAMI BEACH FL 33139		3. Date Incorporated or Qualified	3a. Date of Last Report
9 Principal P	lace of Business	2a. Mailing Address		07/06/1992 4. FEI Number	05/01/1995
21	iade di Eusinesis	26. Walling Address		65-0403594	Applied For Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State		6. Flection Campaign Financing	\$5.00 May Be
Zip Country		Zip Country		Trust Fund Contribution	Added to Fees
24 Zip	25	29 29	30 Cochiry	This corporation has liability for in Florida Statutes	htangible tax under si 199 032 Yes Di No
<u>***</u>	9. Name and Address of Curr		[30]	10. Name and Address of New Reg	
Dr	ose, leo, jr.		81 Name		* *************************************
	111 LINCOLN RD.		82 Street Add	Iress (P.O. Box Number is Not Acceptable	e)
	UITE 500				
	IAMI BEACH FL 33139		83		
			84 City		85 Zip Code
44 Purcuent	to the provisions of Sections 607.06	00 and 007 1609 Florida Char	Land Brown of the second of th		FL 10 17 50.00
office or r	registered agent, or both, in the Stal	te of Florida. Such change was	authorized by the corporat	poration submits this statement for the purions board of directors. Thereby accept	rpose or changing its registered the appointment as registered
-	im familiar with, and accept the obli	gations of, Section 607,0505 F	londa Statutes		
SIGNATURE	Stgrature, typodior procedinanie of registered a	gent and title if applicable (N	r)TE. Be getered Agent signature requ	irea when reinstating)	DAIs
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	∣ VP	DELFTE	1 1 TITLE		Change Addition
NAME	DUNAEVSKY, DOV		1.2 NAM€		
STREET ADDRESS	4409 ALTON RD.		1.3 STREET ADORESS		
CITY-ST-ZIP TITLE	MIAMI BEACH FL	DELETE	1.4 CITY - ST - ZIP		
NAME			2.1 TIFLE		Change Addition
STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
CITY - ST - ZIP			2 4 CITY - ST - ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME		 -	3.2 NAME		
STREET ADDRESS			3 3 STREET ADORESS		
CITY-ST-ZIP			34 CITY ST ZIP		
TITLE		DELETE	4.1 TIFLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
DITY-ST-ZIP		DELETE	4.4 C(1Y - ST - ZIP 5.1 TITLE		Change Addition
NAME			5 2 NAME		Ghange Addie3h
STREET ADDRESS			5 3 STREET ADORESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		DELETE	61 UILE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-SI-ZIP	Land the state of		6 4 CHTY - ST - ZIP		
turther ce	rtify that the information indicated o	en this annual report or suppler	mental acqual report is true.	lify for the exemption stated in Section 1 and accurate and that my signature shall dito execute this report as required by C	have the same legal effect as if napter 617, Fiorida Statutes, and
010:	HOT)			al la	(305) 538-1666
SIGNAT	URE GONATURE AND TYPED	OR PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR	/ / //////////////////////////////////	Dayfar Frida K