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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 15 1997 8:00am

Secretary of State

- I BANKA MAMANAKAN ALAK BAKAR KECAT MENDINDAN ANDER BIDM DEBUT HICK DIDM (A SA

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 264023

(3)

FEDERAL DISCOUNT CENTERS COMPANY

Principal Place of Business Mailing Address   621 71ST STREET 621 71ST STREET   P.O. BOX 414258 P.O. BOX 414258   MIAMI BEACH FL 33141 MIAMI BEACH FL 33141-0							· · · · · · · · · · · · · · · · · · ·							
US				US					Date Incorporated or Qualified 3a. Date of Last Report 04/29/1962 04/29/1996					
2. Principal P	lace of Busine	ess	2a. N	ailing Address				4. FEI Num	xer		1	<del></del>	pplied For	
21			26					59-09	79913		,.	···	ot Applicabl	e
Suite, Apt		27					5. Certificat	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required						
City & Stat 23	e		28	ity & State				l l	Campaign Fin nd Contributio	_		-	May Be to Fees	
Zip		Country	Z	ip	Çoı	untry	/	B. This corp	oration has lia	ability for in	ntangible	tax under s	s. 199.032,	
24	25		29		30				Florida Statutes Yes No					_
<u> </u>			Current Register	red Agent		-	Labora	10. Name ar	d Address of	New Reg	pistered /	Agent		4
	skin, lloyd					81	Name							
I	71ST STRE . BOX 41425					82	Street A	ddress (P.O. Box N	umber is Not	Acceptab	le)			
	MI BEACH F					83								
						84	City				FL	<b>85</b> Zip	Code	$\dashv$
11 Pursuant	to the provisir	ons of Sections 6	07 0502 and 607	1508 Florida Sta	tutes the a	bov	e-named r	corporation submits	this statemen	t for the n	urnose of	changing	its registere	Н
office or r	registered age	nt, or both, in th	State of Florida	Such change wa	s authorize	d b	y the corpo	oration's board of d	regions. I here	Ny accer	t the app	ointment as	registered	^
	ım tartıllar wil	and accept the	e oping allons of, s	section bu7.0505,	Fiorida Sta	tute	S.	1	121	10	7-			-
SIGNATURE	Signature, typed o	r printed name of regis	ted agent and the La	pplicable. (N	IOTE: Registere	d Ap	ent signature r	equired when reinstating)	764	1-	DATE	<del></del>		٠
12.		OFFICE	RS AND DIRECT	ORS ,	13.				IS/CHANGES	TO OFFIC	ERS AND	DIRECTO	RS IN 12	╛
THILE	ASD			DELETE	1.1 T	ITLE						☐ Change	Addition Addition	n
NAME	MULTACK	, jo ellen			1.2 N	IAME	- 1							-
STREET ADDRESS	621 71ST	STREET			1.3 S	TREET	ADDRESS							
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NAME	RUSKIN, I				2.2 N	IAME	i							
STREET ADDRESS	621 71ST				23 S	TREE	ADDRESS							
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CITY - ST - ZIP	MIAMI BE	ACH FL		····			ST-ZIP		.,	<del></del>				
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NAME		, WILLIAM			5.2 N	IAME		_						
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CiTY - S1 - ZiF	MIAMI BE	ACH FL			5.4 0	HTY-	ST-ZIP							
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NAME		N, JOSEPH H			6.2 N	IAME								
STREET ADDRESS	621 71ST				6.3 \$	TREE	T ADDRESS							
i	MAIANG OF	ACH EI												- 1

14. I do 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.