


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2006 8:00 am
Secretary of State

05-23-2006 90011 016 ***150.00

DOCUMENT # 330835 1. Entity Name TAMPA DISCOUNT AND INVESTMENT CORP.					
Principal Place of Business 4346 DUNBARTON SUITE#3 TAMPA, FL 33611 US			Mailing Address P.O. BOX 13598 P. O. BOX 13598 TAMPA, FL 33681-3598 US		
2. Principal Place of Business 2413 BAYSHORE BLVD. Suite, Apt. #, etc. # 406			3. Mailing Address Suite, Apt. #, etc.		
City & State TAMPA FL			City & State		
Zip 33629		Country US		4. FEI Number 59-1258316	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent KESSLER, WALTER H. 4346 DUNBARTON #3 TAMPA, FL 33611				7. Name and Address of New Registered Agent Name WALTER H. KESSLER Street Address (P.O. Box Number is Not Acceptable) 2413 BAYSHORE BLVD - #406 City TAMPA FL Zip Code 33629	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WITTCOFF, RICHARD 4346 DUNBARTON #3 TAMPA, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2413 BAYSHORE BLVD. - #406 TAMPA FL 33629	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KESSLER, WALTER H. 4346 DUNBARTON #3 TAMPA, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2413 BAYSHORE BLVD. - #406 TAMPA FL 33629	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KESSLER, ROBERT M. 4346 DUNBARTON #3 TAMPA, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2413 BAYSHORE BLVD. - #406 TAMPA FL 33629	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Walter H. Kessler</u> WALTER H. KESSLER				Date <u>813-251-2602</u>	