2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jun 02, 2002 8:00 am Secretary of State

DOCUMENT # F9400000035 1. Entity Name BUSINESS DISCOUNT PLAN, INC.					Secretary of State 04-23-2002 90355 028 ***150.00		
Principal Place of Business ONE WORLD TRADE CENTER SUITE 800 LONG BEACH CA 90831 US Mailing Address 3780 KiLROY AIRPORT 200 LONG BEACH CA 9081 US							
2. Principal	Il Place of Business	3. Mailing Address					
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & St	ate	City & State			4. FEI Number	or .	
Zip	Country	Zip	Country		33-0544520 Not Applica 5. Certificate of Status Desired \$8.75 Additional	able	
	6. Name and Address of Current R	egistered Agent			7. Name and Address of New Registered Agent		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST., STE. 105 TALLAHASSEE FL 32301 8. The above named entity submits this statement for the purpose of changing its				lame	(P.O. Box Number is Not Acceptable)		
				City FL Zip Code			
rax riring r	Signature, typed or printed name of registered agent and oration is eligible to satisfy its Intangible requirement and elects to do so, ria on back)	FILE NOW!! After May 1, 200 Make Check Payabl	!! FEE IS \$	be \$550.00	10. Election Campaign Financing \$5.00 No. 2	,	
11.	OFFICERS AND DIR	RECTORS	12.		ADDITIONS (OLIANOSO TO ACCUMENTATION OF THE PROPERTY OF THE PR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMAS DAVID JENKINS 3780 KILROY AIRPORT WAY RM 20 LONGBEACH CA 90806	C Delete	NAME STREET ADDI	aree O	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDE JAVID JENKINS Change Produite One World Trade Center St. #800 Long Beach, CA 90831	on	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	RESS	☐ Change ☐ Addition	n	
TREET ADDRESS		☐ Delete	TITLE NAME STREET ADDR	ESS	☐ Change ☐ Addition		
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13. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SCHATURE AZBONREDOM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-02

949 798.7020

Daytima Phor