FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

M73332

CELLIII	ΛD	DISCOUNTERS.	INIC
ULLLUL	.nı	DISCOUNTILING	

Principal Place of Busines C/O JEFFREY N. MARI 2040 N.E. 163RD STRE MIAMI FL 33162 2. Principal Place of Bus 21 Suite Apt. #, etc 22 City & State 23 Zip 24 9. Nam MARKS, JEFFRE	Country 25 Le and Address of Curren	Mailing Address C/O JEFFREY N. MAR 2040 N.E. 163RD STRE MIAMI FL 33162 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 t Registered Agent		V	3. Date Incorporated or Qualified 03/23/1988 4. FEI Number 65-0400552 5. Certificate of Status Desired 6. Election Campaign Financing	3a. Date of Last Re 03/02/199 A 88.75 Fee F	port)5 pplied For lot Applicable Additional tequired
2040 N.E. 163RD STRE MIAMI FL 33162 2. Principal Place of Buse of Bus	Country 25 le and Address of Curren	2040 N.E. 163RD STRE MIAMI FL 33162 2a. Mailing Address 26 Suite, Apt. #, etc. 27 Oty & State 28 Zip 29	Countr	V	03/23/1988 4. FEI Number 65-0400552 5. Certificate of Status Desired	03/02/199 A S8.75 Fee F	pplied For lot Applicable Additional tequired
2. Principal Place of Bus [1] Suite Apt. #, etc. [2] City & State [3] Zip. [4] 9. Nam	Country [25] le and Address of Curren	2a. Mai'ing Address 26 Suite, Apt. #, etc. 27 Oty & State 28 Zip 29	F¬	V	03/23/1988 4. FEI Number 65-0400552 5. Certificate of Status Desired	03/02/199 A S8.75 Fee F	pplied For lot Applicable Additional tequired
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2 City & State 3 Zip 4 9. Nam	25 e and Address of Curren	27 Oty & State 28 Zip 29	F¬	v	5. Certificate of Status Desired	□ Fee F	tequired
3 	25 e and Address of Curren	28 Zip	F¬	v	6. Election Campaign Financing	_ \$5.00	
74) 4 9. Nam	25 e and Address of Curren	Zip 29	F¬	ν	Trust Fund Contribution) May Be I to Fees
9. Nam	e and Address of Curren			•	8. This corporation has liability for		
MARKS, JEFFRE	Y N.		-4		10. Name and Address of New F		
MARKS, JEFFRE	Y N.		8	1 Name			
0040 NE 400DE		82 Street Add		ess (P.O. Box Number is Not Acceptab	ole)		
2040 N.E. 163RI Miami Fl 33162	SIREEI		83	3			
			84	4 City		85 Zip	Code
44 Fr				1	ration submits this statement for the pu		
or registered agent, of familiar with, and acc SIGNATURE	or both, in the State of Floric cept the obligations of, Secti	da. Such change was authorizi on 607.0505, Florida Statutes	ed by the cor	poration's boar	rd of directors. I hereby accept the app	ointment as registered	agent. I am
Superine, type	d or proted name of registered agent OFHICERS ANS		IE: Registered Ag 13.	ont signature require	d when reinslating) ADDITIONS/CHANGES TO OFF	DATE	20 INI 10
112. 1116 DP	OFFIGERS AND	DELETE	1 1 THTLE		ADDITIONS/CHANGES TO OFF	Change	Addition
	(S, JEFFREY N.		12 NAME	:			
	N.E. 163RD ST.		13 STREE	ET ADDRESS			
OLY-ST-ZIP MIAM			14 CITY	ST-ZIP			
10.0		DELETE	2 1 TITLE			☐ Change	Addition
NAME			2 2 NAME				
STHEFT A THIRE'S			2.3 STREI	ET ADDRESS			
CHY ST ZIP		——————————————————————————————————————	24 CITY -			(7) (harris	
NILE NISH		DELFTE	3 1 7111.6			Change	☐ Addition
NAMI STHEFT ACORESS			3.2 NAME	ET ADDRESS			
CLIA 21 ZE			3 3 5 NE				
THE		DELETE	4. 1 TITLE			Change	Addition
NAME			4.2 NAME				_
SHELL ADDRESS			4 3 STREE	ET ADORESS			•
CITY ST ZIP			4 4 C(1) Y	· ST - ZIF			
TITLE		DETE LE	5 1 TITLE			☐ Change	Addition
NAM ₀			5.2 NAME				
STREET ADDRESS			53 STRE	ET ADDRESS			
01Y-S1-7/F		ריין אנו כדנ	5 4 CITY-			[7] Channa	E Addition
THE SAME		☐ DELFTE	6 1 THE			☐ Change	Addition
STREET ADORESS			6.2 NAMS	ET ADDRESS			
CHY-\$4-ZIP			6.4 CITY				
14. I do hereby certify th	at the information supplied	with this filing is voluntarily furn	ished and do	es not qualify f	for the exemption stated in Section 119 attention and that my signature shall have the	.07(3)(k), Florida Statute	es. I further

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96

(305)940-8652

Daytinia Phone #