


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P0000000168
1. Entity Name
DISCOUNT LIGHTING & SUPPLIES, INC.



Principal Place of Business Mailing Address
14525 SOUTHWEST 175TH STREET 14525 SOUTHWEST 175TH STREET
MIAMI, FL 33177 MIAMI, FL 33177

DO NOT WRITE IN THIS SPACE



04132006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0969862 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, CARLOS
14825 SW 175 STREET
MIAMI, FL 33177

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000513968
04/29/06-80148-023 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GARCIA, CARLOS J 14525 SOUTHWEST 175TH STREET MIAMI, FL 33177
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IN THIS SPACE**

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: Carlos Garcia Date: 4-13-06 Daytime Phone #: 305 287 9824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR