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2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P0000 1. Entity Name DS, INC.	00027614	
Principal Place of Business 13641 NW 7TH AVENUE NORTH MIAMI, FL 33168	Mailing Address 13641 NW 7TH AVENUE NORTH MIAMI, FL 33168	

DO NOT WRITE IN THIS SPACE



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04292004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0996684 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SAHA, SONCHITA 13641 NW 7TH AVENUE NORTH MIAMI, FL 33168

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when rehistating) DATE						
		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	_	
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAHA, SONCHITA 13641 NW 7TH AVENUE NORTH MIAMI, FL 33168	-			U000001513 S D	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	VP SAHA, DULIP 13641 NW 7TH AVENUE NORTH MIAMI, FL 33168				05/04/04-80042-007 150.00	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
12. 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 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 charged, or or an attachment with an address, with all other like empowered.						

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR