


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State

02-03-2005 90041 015 ***150.00

DOCUMENT # P01000074720 1. Entity Name DISCOUNT FARES, INC.																													
Principal Place of Business 10 NW 42 AVE. 210 MIAMI, FL 33126			Mailing Address 10 NW 42 AVE. 210 MIAMI, FL 33126																										
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip 		3. Mailing Address 1001 Brickell Bay Drive 1712 Miami, FL City & State Zip 33131																											
Country 		Country 		4. FEI Number 65-1125333																									
Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																											
6. Name and Address of Current Registered Agent WEI, PETER 10 NW 42 AVE., STE 210 MIAMI, FL 33126			7. Name and Address of New Registered Agent Name Peter Wei Street Address (P.O. Box Number is Not Acceptable) 1001 Brickell Bay Drive Suite 1712 City Miami FL Zip Code 33131																										
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, 2005 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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PSTD</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>WEI, PETER</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>10 NW AVE., STE 210</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33126</td> <td></td> </tr> </table>			TITLE	PSTD	<input type="checkbox"/> Delete	NAME	WEI, PETER		STREET ADDRESS	10 NW AVE., STE 210		CITY-ST-ZIP	MIAMI, FL 33126		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PSTD</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>WEI, PETER</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1001 BRICKELL BAY DR STE 1712</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33131</td> <td></td> </tr> </table>			TITLE	PSTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	WEI, PETER		STREET ADDRESS	1001 BRICKELL BAY DR STE 1712		CITY-ST-ZIP	MIAMI, FL 33131	
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter Wei President

Date

1/26/05

Domestic Phone #

(305) 374-2022