## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000090122

FILED Apr 29, 2004 Secretary of State

Entity Na	me: COMPAI	NY DISCOUNTS U.S.A., INC	<u>).</u>		
Current P	rincipal Place	e of Business:	New Principal Place of Business:		
	DGATE CIRCI , FL 33326	.E			
Current N	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
PO BOX 2 FORT LAU	90608 JDERDALE, F	L 333290608			
FEI Number	: 32-0029474	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address of	New Registered Agent:	
528 WOO SUNRISE	ER, CAROL DGATE CIRCI , FL 33326 e named entity e of Florida.		e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Election Ca		nic Signature of Registered <i>i</i> g Trust Fund Contribution ( ).	Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( SCHNEIDER, 0 528 WOODGA SUNRISE, FL	TE CIRCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( BURSKY, STE 528 WOODGA SUNRISE, FL	TE CIRCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL SCHNEIDER Ρ 04/29/2004