2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090070

Entity Name: DISCOUNT AUTO WHOLESALE CENTER INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

300 LAKEPOINTE DR. 141 OAK VIEW PLACE SANFORD, FL 32773

ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address: New Mailing Address:

300 LAKEPOINTE DR.
141 OAK VIEW PLACE
SANFORD, FL 32773 US

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 56-2386397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VAZIRI, ALI
300 LAKEPOINTE DR.
102

VAZIRI, ALI
141 OAK VIEW PLACE
SANFORD, FL 32773 US

ALTAMONTE SPRINGS, FL 32701 US

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.

SIGNATURE: 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: P () Delete Title: P (X) Change () Addition

Name: VAZIRI, ALI Name: VAZIRI, ALI

Address: 300 LAKEPOINTE DR. #102 Address: 141 OAK VIEW PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US City-St-Zip: SANFORD, FL 32773 US

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: ALI VAZIRI P 04/28/2005