

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000089765

FILED
Apr 30, 2008
Secretary of State

Entity Name: BUYERS & SELLERS DISCOUNT REALTY INC.

Current Principal Place of Business:

40 SE 4 RD
HOMESTEAD, FL 33030

New Principal Place of Business:

8345 NW 68 ST
MIAMI, FL 33166

Current Mailing Address:

40 SE 4 RD
HOMESTEAD, FL 33030

New Mailing Address:

8345 NW 68 ST
MIAMI, FL 33166

FEI Number: 20-1481449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ LEON, CASONNIE
40 SE 4 RD
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

RUIZ LEON, CASONNIE
8345 NW 68 ST
MIAMI, FL 33166 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: CASONNIE RUIZ LEON

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RUIZ LEON, CASONNIE
Address: 40 SE 4 RD
City-St-Zip: HOMESTEAD, FL 33030

Title: V () Delete
Name: RUIZ LEON, CASONNIE
Address: 40 SE 4 RD
City-St-Zip: HOMESTEAD, FL 33030

Title: T (X) Delete
Name: RUIZ LEON, CASONNIE
Address: 40 SE 4 RD
City-St-Zip: HOMESTEAD, FL 33030

Title: S (X) Delete
Name: RUIZ LEON, CASONNIE
Address: 40 SE 4 RD
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,VP (X) Change () Addition
Name: RUIZ LEON, CASONNIE
Address: 8345 NW 68 ST
City-St-Zip: MIAMI, FL 33166

Title: S,T (X) Change () Addition
Name: RUIZ LEON, CASONNIE
Address: 8345 NW 68 ST
City-St-Zip: MIAMI, FL 33166

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CASONNIE RUIZ LEON

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date