FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT **1999**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90172 037 ***150.00

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Corporation Name

GENERAL DISCOUNT CORP.

Principal Place of Business	Mailing Address		I (Beltan) ile cent anno setu estu es	101 12141 Billy 10010 12(1) \$101 (42)
42 S.E. 1ST ST.	42 S.E. 1ST. ST. MIAMI FL 33131			:
MIAMI FL 33131			DO NOT WRITE IN THIS SPACE	
US	US		3. Date Incorporated or Qualifed	IIO OI AOE
		,	11/28/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0539018	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27		5. Certifcate of Status Desired	Fee Required
City & State :	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year	
24	29 3	30	Personal Property Tax.	Yes 1711No
9. Name and Address of	Current Registered Agent		10. Name and Address of New Registere	d Agent
		81 Name		
ZAIDAN, MARIO		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
121 N.E. 1ST ST.				
MIAMI FL 33132		83		
		84 City		85 Zip Codé
				L
office or registered agent, or both, in the agent. I am familiar with, and accept the SIGNATURE Signature, typed or printed name of registers.	State of Florida. Such change was autobligations of, Section 607.0505, Florid	thorized by the corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate of the purpose of the	pointment as registered
	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE D	LX DELETE	1.1 TITLE	 	☐ Change ☐ Addition
NAME ZAIDAN, MARIO	,	1.2 NAME		
STREET ADDRESS 121 N.E. 1ST ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL 33132		: 1.4 CITY-ST-ZIP		
TITLE TO DUELINE BUFF	FARY PRIORN DELETE	2.1 TITLE		☐ Change ☐ Addition
MANE DIOCESTA		2.2 NAME		•
STREET ADDRESS 42 SE IST STR	eer	2.3 STREET ADDRESS		
STREET ADDRESS 425 E IST S+R CITY-ST-ZIP MITMI, FL	3 3 / 3	2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME	: <i>*</i>	
STREET ADORESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4,1 TITLE		Change Addition
NAME .		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS	•	•
CITY-ST-ZIP		4.4 CITY-ST-ZIP		<u> </u>
TITLE	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE	:	☐ Change ☐ Addition
NAME	•	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY+ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LA CONTROL OF SIGNING OFFICER OR DIRECTOR

4/27/99 305 358/02/

POE034 (11/08)

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