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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000089235 (2)

A & B DISCOUNT SERVICES, INC.

FILED Apr 04 1997 8:00am Secretary of State



телограг масс	e or Business	Mailing Add	Mailing Address			. Hadinan isa iman diss adist busi datit unter ibite tura saut saut			
13723 N 158TH ST 		6871 W IND #56-188	6871 W INDIANTOWN RD.						
		UPITER FL	33458-3972			\			
			SOUTH LE SOUGO COTE			3. Date incorporated or Qualified 3a. Date of Last Report			
						11/21/1995		/1996	, open
2. Principal P	lace of Business	2a. Mailing	Address	***************************************		4. FEI Number		A	pplied For
1		26	······································			65-0623343			lot Applicable
Suite Apit.	H. etc.	Suite A	pt. #, etc.			5. Certificate of Status Desired		•	Additional
2[[27]		····					Required
City & Stat	е	City & S	tate			6. Election Campaign Financing			May Be
200	Country	28		Countr	····	Trust Fund Contribution			to Fees
Zip 24	⊢ '	Zip		30	,	This corporation has liability for Florida Statutes	intangible ta: X Yes 🔲		s. 199.032,
<u> </u>	25 9. Name and Address of Curre	29 ont Registered Ag	ent	[30]		10. Name and Address of New Ro			
DDD	NTISS, THOMAS R III			81	Name				
	23 N 158TH ST								<u></u>
	PITER FL 33478			82	Street Add	dress (P.O. Box Number is Not Accepta	ple)		
301				83	 				
				_					
				84	City		FL	65 Zip	Code
11. Pursuant	to the provisions of Sections 607 05	02 and 607 1508	Florida Statute	es the abov	e-named cor	poration submits this statement for the		L	its registered
office or r	registered agent, or both, in the Stat	e of Florida. Such	change was a	uthorized b	y the corpora	poration submits this statement for the ation's board of directors. I hereby acce	pt the appoir	itment a	s registered
	im familiar with, and accept the obli	gations of, Section	607.0505, Flo	orida Statute	S.				
SIGNATURE	Signature Typed or printed name of registered a	nent and tille if applicable	(NOTI	E: Registered Ad	ent signature regu	uired when reinstating)	DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND D	RECTO	RS IN 12
THE	DPS	Ī	DELETE	1.1 TITLE			L	Change	Addition
NAME	PRENTISS, THOMAS R III			1.2 NAME					
STREET ADDRESS	13723 N 158TH ST			1.3 STREE	T ADDRESS				
CITY - ST - ZIP	JUPITER FL 33478			1.4 CITY-	ST-ZIP				
HILF	DVT		DELETE	2.1 TITLE		,		Change	Addition
NAME	PRENTISS, TRACY L			2.2 NAME					
STREET ACORESS	13723 N 158TH ST			2.3 STREE	T ADDRESS				
0(1Y+\$1-ZIP	JUPITER FL 33478			2.4 DITY-	ST-ZIP				
TITLE			DELETE	31 TITLE				Change	Addition
NAME				3.2 NAME	Ì				
STREET ADDRESS				3.3 STREE	T ADDRESS				
CiTY+S1+7iP				3 4. CITY -	ST-ZIP				
TITLE			DELETE	4.1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4 3 STREE	T ADDRESS				
CITY -ST-7IP				4.4 CITY -	ST-ZIP				
TITLE			DELETE	5.1 TITLE	T	-		Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY+ST-ZIP				5.4 CITY -	ST-ZIP				
1111.6	100 100 100 100 100 100 100 100 100 100		DELETE	6.1 TITLE				Change	Addition
NAMi]			6.2 NAME					
STREET ADDRESS				6.3 STREE	T ADDRESS				
CITY-ST-74P				6.4 CITY-	ST-ZIP				
	to a second seco	4							

I do 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 Lam an efficient or interctor 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 attendment with an address.

SIGNATURE: