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FILED  
Jan 28 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000066943 (7)**

1. Corporation Name

**TRANSPLANT DISCOUNT ENTERPRISES, INC.**

Principal Place of Business

Mailing Address

**13255 BISCAYNE BLVD.  
N MIAMI FL 33181  
US**

**13255 BISCAYNE BLVD.  
N MIAMI FL 33181  
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 <b>4960 SW 52nd St.</b>	26 <b>SAME</b>	3. Date Incorporated or Qualified <b>08/12/1996</b>	
Suite, Apt. #, etc. <b>420</b>	Suite, Apt. #, etc. <b>SAME</b>	4. FEI Number <b>65-0698852</b>	Applied For <input type="checkbox"/> Not Applicable
22 <b>DAVIE FL.</b>	27 <b>SAME</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
23 <b>33314</b>	28 <b>USA</b>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country		
24 <b>33314</b>	25 <b>U.S.A.</b>		
29 <b>SAME</b>	30 <b>USA</b>		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DORFMAN, CICELY B  
10105 MYSTIC POINTE DR., #407  
AVENTURA FL 33160**

**5678 Royal Lake  
Circle  
Boynton Beach FL  
33477**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GELLER, PHYLLIS</b>	1.2 NAME	
STREET ADDRESS	<b>2221 HEMLOCK FARMS</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>HAWLEY PA</b>	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DORFMAN, CICELY B</b>	2.2 NAME	
STREET ADDRESS	<b>10105 MYSTIC POINTE DR., #407</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>AVENTURA FL</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE:

**MARTIN DORFMAN**

**1/19/98**

**954-583-5111**

CF2E034 (10/97)