FILED

Daytime Phone #

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT WBR

Aug 07, 2003 8:00 am Secretary of State P97000092361 DOCUMENT # 08-07-2003 90118 019 ***150.00 1. Entity Name NY DISCOUNT CENTER, INC. Mailing Address 8030 W 26TH AVE Principal Place of Business 7900 NW 27TH AVE NORTHSIDE SHOPPING CENTER HIALEAH FL 33016 MIAMI FL 33147 2. Principal Place of Business 3. Mailing Address 7900 NW Suite, Apt. #, etc. Suite, Apt. #, etc. NUNTHSIDE SHOPPING CENTER ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0790701 Not Applicable Zip Country Countr \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.=Name and Address of Current Registered Agent = 7.=Name and Address of New Registered Agent Name ATARY, YORAM Street Address (P.O. Box Number is Not Acceptable) 4991 NW 102ND DR **CORAL SPRINGS FL 33076** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition TITLE Delete TITLE □ Change ATARY, YORAM NAME NAME 4991 NW 102ND DRIVE STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33076** CITY-ST-7IP CITY-ST-7iP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME: STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if

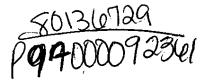
address, with all other like empowered.

REQUIRED

changed, or on an attachment with

SIGNATURE:

Attachment



NY DISCOUNT CENTER, INC. 7900 NW 27th AVENUE NORTHSIDE SHOPPING CENTER MIAMI, FL 33147

August 4, 2003

Re: NY Discount Center, Inc.

Document # P97000092361

To Whom It May Concern,

Please accept this check for \$150.00 as payment of the UBR filing fee. I never received the original document. I always file documents in a timely manner, and would appreciate if the late fee of \$400.00 could be waived.

Thank you for your time and consideration in this matter.

Yoram Atary

NY Discount Center, Inc.