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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # CO4

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90062 026 ***150.00

	on Name # SU169	1						
,								
DINAS	DISCOUNT, INC.							
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Oringinal Plac	ce of Business	Mailing Address			<u></u>	TO COUNTY OF THE STATE	CHEN CHEN NEW	
,		-						
9841 SW 40TH MIAMI FL 3316		9841 SW 40TH STREET MIAMI FL 33165						
10010		WITHIN 1E 00100			DO NOT WRITE.IN T	HIS SPACE		
					3. Date Incorporated or Qualifed			1
					09/24/1990			
<u> </u>	Place of Business	2a. Mailing Address			4. FEI Number	<u> </u>	plied For	15
21		26			65-0218104		t Applicable	15
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A		'
City & Star	<u> </u>	City & State						┨
23	ie ,	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added 1		
Zip	Country	Zip ,	Countr	~	8. This corporation owes the current year		U FEES	┨
24	25		30	,	Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of Curre	 	<u> </u>		10. Name and Address of New Register	ed Agent		1
			8	1 Name				1
	ROON, THOMAS P SR		8:	2 Street Arid	Iress (P.O. Box Number is Not Acceptable)			┨
	00 SW 99 AVE		<u></u>	2 Street Add	iness (i.e., box intrinser is interpretable)		Secretaria Mara 1999	<u> </u>
MIA	MI FL 33134		8:	3	(1) (A) (A) (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	相談談的]
			84	4 City		. 85 Zip (Code	-
	er e e e e	comment and the second		' '	, F	-		1
								1
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the abou	ve-named corp	poration submits this statement for the purpose	of changing its	registered	[
	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations.				poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its pointment as re	registered gistered	
	am familiar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statute	s.	on a board of amounts. Thorough accopt the ap	pominion de te	registered gistered	
agent. I a	m familiar with, and accept the obligations of the obligation of the state of the obligation of the state of the obligation of the obligat	ations of, Section 607.0505, Flori ant and title if applicable. (NOTE:	ida Statute Registered Age	s.	ed when reinstating)		· · · · · · · · · · · · · · · · · · ·	188
agent. I a	m familiar with, and accept the obligation of th	ations of, Section 607.0505, Flori ent and title if applicable. (NOTE: ND DIRECTORS	Registered Age	ent signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	(1/08)
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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 supplementar 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 of trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is charged, or on an attachage with an address, with all other like empowered.

SIGNATURE: