2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 17, 2005 08:00 AM DOCUMENT # S39675 **Secretary of State** DISCOVERY INVESTMENTS, INC. Principal Place of Business Mailing Address 777 SOUTH FEDERAL HIGHWAY FT. LAUDERDALE FL 33316 777 SOUTH FEDERAL HIGHWAY FT. LAUDERDALE FL 33316 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0251255 Not Applicable Zíp Country Country \$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 WHIDDON, GENE A JR 777 SOUTH FEDERAL HIGHWAY Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33316 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. DPVS TITLE ☐ Delete TUTE Addition Change WHIDDON, GENE A JR NAME NAME STREET ADDRESS 777 SOUTH FEDERAL HIGHWAY STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33316 CITY-ST-ZIP TITLE Delete TITLE ☐ Addition WHIDDON, GENE A JR NAME STREET ADDRESS STREET ADDRESS 777 SOUTH FEDERAL HIGHWAY CITY-ST-ZIP FT. LAUDERDALE FL 33316 CITY-ST-ZIP TITLE Delete TUTLE ☐ 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 NAME MANE STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP I1TEF Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS C(1Y-51-7)P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information inclicated on this report of 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 trusted empowered to execute this report as equired by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like showered.

FILED