

NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MAXIMUM AMOUNT DUE TO PENALTY: \$750).

\$615.00

PROFIT CORPORATION ANNUAL REPORT 1998
 FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

98 NOV 16 PM 3:45

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 585987
 1. Corporation Name
 Consumer Discount Services, Inc.

Principal Place of Business Mailing Address
 7525 N.W. 61 Terr #2901 (same)
 Parkland, FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/08/91

21	2. Principal Place of Business	2a. Mailing Address	26
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	27
23	City & State	City & State	28
24	Zip	Country	29
25			30

4. FEI Number 59-2645617
 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
 Lyons, James B.
 1881 University Drive
 Suite 206
 Coral Springs, FL 33071

10. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	President	<input type="checkbox"/> DELETE
NAME	Oscar Leyva	
STREET ADDRESS	7525 N.W. 61 Terr #2901	
CITY-ST-ZIP	Parkland, FL 33067	
TITLE	Vice President	<input type="checkbox"/> DELETE
NAME	Arnette A. Leyva	
STREET ADDRESS	7525 N.W. 61 Terr #2901	
CITY-ST-ZIP	Parkland, FL 33067	
TITLE	Seymour Z. Frischer	<input checked="" type="checkbox"/> DELETE
NAME	21234 Hazelwood Lane	
STREET ADDRESS	Boca Raton, FL 33428	
CITY-ST-ZIP		
TITLE	Evelyn Frischer	<input checked="" type="checkbox"/> DELETE
NAME	21234 Hazelwood Lane	
STREET ADDRESS	Boca Raton, FL 33428	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	400002691764--7
2.4 CITY-ST-ZIP	11/19/98--01080--003
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	****515.00 ****515.00
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: Oscar Leyva [Signature] 11/11/98 (561) 852-4770
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/96)

CONSUMER DISCOUNT SERVICES, INC.

7525 NW 61 TERRACE #2901

PARLAND, FL 33067

(954)752-8770

November 11, 1998

Ms. Leslie Sellers
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Ms. Sellers;

This letter is to explain that on April 7, 1995, my father, Seymour Z. Frischer, past away and no longer was President of Consumer Discount Services.

My father at that time left me his 50% of the business and my husband, Oscar Leyva became the new President.

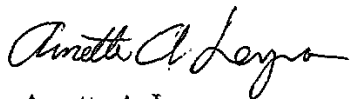
We did forward the new address and information but somehow the unit number was not added to your records and we never received the renewal.

I appreciate all of your assistance on helping me straighten the problem out and correcting the address.

I am quite new at all of this and I am still trying to learn.

Thank you for your patience and understanding in this matter.

Sincerely,



Arnette A. Leyva