

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S85987

FILED
Aug 31, 2005
Secretary of State

Entity Name: CONSUMER DISCOUNT SERVICES, INC.

Current Principal Place of Business:

7600 NW 61 TERR
PARKLAND, FL 33067

New Principal Place of Business:

Current Mailing Address:

7600 NW 61 TERR
PARKLAND, FL 33067

New Mailing Address:

FEI Number: 59-2645617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYONS, JAMES B.
3300 UNIVERSITY DRIVE
SUITE 802
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEYVA, OSCAR
Address: 7600 NW 61 TERR
City-St-Zip: PARKLAND, FL 33067

Title: S () Delete
Name: LEYVA, ARNETTE A
Address: 7600 NW 61 TERR
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OSCAR L. LEYVA

PRES

08/31/2005

Electronic Signature of Signing Officer or Director

_____ Date