2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005748

Entity Name: DMSEA CORP.

FILED Apr 23, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Pla	nce of Business:	
SUITE 506	LE RIVER DRI 3 JDERDALE, F				
Current M	lailing Addres	ss:	New Mailing Add	New Mailing Address:	
SUITE 506 FORT LAU	JDERDALE, F	L 33304			
FEI Number	: 65-1148550	FEI Number Applied Fo	r () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered A	gent: Name and Addres	Name and Address of New Registered Agent:	
915 MIDD FORT LAI	S, GEORGE R LE RIVER DR. JDERDALE, F	L 33304 US		and office as a societies of exact as both	
	e named entity: e of Florida.	submits this statement	for the purpose of changing its registi	ered office or registered agent, or both,	
SIGNATU	RE:				
	Electror	nic Signature of Registe	ered Agent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution	().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DAVILA, LINA 5000 N. OCEAI) Delete N BLVD #707 DALE, FL 33308	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DAVILA, HELEI 5000 N. OCEAI		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LINA DAVILA PSTD 04/23/2009