

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State

05-24-2004 90010 005 ***150.00

DOCUMENT # L02472

1. Entity Name
DAO CONSULTANTS, INC.



Principal Place of Business

% DUY DAO
7610 CLUBHOUSE ESTATES DR
ORLANDO, FL 32819

Mailing Address

% DUY DAO
7610 CLUBHOUSE ESTATES DR
ORLANDO, FL 32819

14022877



2. Principal Place of Business

1110 E. MARKS ST

3. Mailing Address

1110 E. MARKS ST

03122003

Chg-P

CR2E034 (10/03)

State, Apt. #, etc.

State, Apt. #, etc.

4. FEI Number

59-2962523

Applied For

Not Applicable

City & State

ORLANDO, FL

City & State

ORLANDO, FL

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

Zip

32803

Country

USA

Zip

32803

Country

USA

6. Name and Address of Current Registered Agent

DAO, DUY
7610 CLUBHOUSE ESTATES DR
ORLANDO, FL 32819

7. Name and Address of New Registered Agent

Name

SOLANGE DAO

Street Address (P.O. Box Number is Not Acceptable)

1620 E. MARKS ST

City

ORLANDO

FL

Zip Code
32803

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 of officer or person authorized to act as registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when removing)

5/20/04

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete

NAME DAO, DUY
STREET ADDRESS 7610 CLUBHOUSE ESTATES
CITY-STATE-ZIP ORLANDO, FL

TITLE D ☐ Delete

NAME DAO, MARIE V.
STREET ADDRESS 7610 CLUBHOUSE ESTATES
CITY-STATE-ZIP ORLANDO, FL

TITLE D ☐ Delete

NAME DAO, SOLANGE C.
STREET ADDRESS 7610 CLUBHOUSE ESTATES DRIVE
CITY-STATE-ZIP ORLANDO, FL

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE PD ☒ Change ☐ Addition

NAME
STREET ADDRESS 1620 E. MARKS ST
CITY-STATE-ZIP ORLANDO, FL 32803

TITLE D ☐ Change ☒ Addition

NAME ARMAND DAO
STREET ADDRESS 7610 CLUBHOUSE ESTS DR
CITY-STATE-ZIP ORLANDO, FL 32819

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this report or 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 trustee empowered to execute this report as required 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/04

407-898-6872