SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (I) DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000000220 (3)

US GOLDMARK ENTERPRISES LTD., INC.

Principal Place of Business

Mailing Address

FILED

Oct 15 1998 8:00am

Secretary of State

5100 HOWELL BRANCH ROAD WINTER PARK FL 32792		6908 ASH STREET VANCOUVER B V69 3-4 CD					
						DO NOT WRITE IN THIS SPACE	
j						3. Date Incorporated or Qualified	
-A Deinsinal Di	ace of Business	2a. Malling Address				10/23/1992 4. FEI Number Applied For	
	ace of Business	}≒¬η				-	
21 Suite Art	# ota	Suite, Apt. #, etc.				59-3156149 Not Applicable \$8,75 Additional	
Suite, Apt. #, etc.		27				5. Certificate of Status Desired Fee Required	
22 City & State		City & State				6. Election Campaign Financing\$5.00 May Be	
23		[28]				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cou	nlry		8. This corporation owes or has paid the current year intangible	
24	25	29	30	·		Personal Property Tax due June 30. Yes No	
= -1	9. Name and Address of Currer	I		[10. Name and Address of New Registered Agent	
SHI	RACHEL L			81	Name		
	HOWELL BRANCH ROAD			02	82 Street Address (P.O. Box Number is Not Acceptable)		
	TER PARK FL 32792			83			

				84	City	FI 85 Zip Code	
11. Pursuani	to the provisions of sections 607.050	2 and 607.1508. Florida Statut	es the ab	0VB-	named co	proretion 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	d by	the corpor	orporation submits this statement for the purpose of changing its registered reation's board of directors. I hereby accept the appointment as registered	
	am familiar with, and accept the oblig	ations of, section 607.0505, Fi	iorida Stat	utes	•		
SIGNATURE	Signature, typed or printed name of registered age	of and title If applicable. (N	OTE: Registe	red A	gent signature	e required when reinstating) DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TC	TLE		Change Addition	
NAME	LO, VICTOR		1.2 NA	ME			
STREET ADDRESS	6908 ASH STREET		1.3 ST	REET.	ADDRESS		
CITY-ST-ZIP	VANCOUVER BC		1.4 CI	TY-ST-	-ZiP		
TITLE		DELETE	2.1 TI			Change Addition	
NAME		C	2 2 NA	ME		· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS			2.3 ST	REET	ADDRESS	•	
CITY-ST-ZIP			2.4 CI		}		
TITLE	·	DELETE	3.1 Tr			Change Addition	
NAME		E "I presente	3.2 NAME				
STREET ADDRESS			3.3 ST	REET	ADDRESS		
CITY-ST-ZIP			3.4 CI		1		
TITLE		DELETE	4.1 111			Change Addition	
NAME		IJ percit	4.2 NA			- Thurst	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			4.4 CI			:	
TITLE		DELETE	5.1 TIT			Change Addition	
NAME		L] Detete	5.2 NA			C Ollarge C Manifoli	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP TITLE	<u> </u>	Doctor	5 4 CI		*IL	Change Addition	
		L] DELÉTÉ	6.2 NA			Change Addition	
NAME					ADDDCCC		
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP	artifu that the information supplied with	n this filing does not qualify for	6.4 Cl			section 119.07(3)(i), Florida Statutes, I further certify that the information	
indicated o	on this annual report or supplemental	l annual report is true and accu aceiver or trustee empowered t	rrate and	that	my signate	ture shall have the same legal effect as if made under oath; that I am srequired by Chapter 607, Florida Statutes; and that my name appears	