FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000014562 (0)

DA MO	U.S.A. INC.	•	•		
OULAS	UOA INU				LICAL PAIN EAGER EAGE EAGE EAGE HER
Principal Place	e of Business	Mailing Address			LOIDT HIBIT OLDBY GYNN SYNN 1989 (498)
15998 NW 49TH AVE. 15998 NW 49TH AVE. MIAMI FL 33014 MIAMI FL 33014				DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified	
				02/22/1994	
Principal Pi	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
<u>[]</u>		26		65-0486791	Not Applicable
Suite, Apt.		Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Ζ(ρ 29	Country 30	This corporation owes or has paid to Personal Properly Tax due June 30.	
	9. Name and Address of Cur		1001	10. Name and Address of New Regist	
10	IEN, MARK C 105 NW-04711 AVE: #49-	Mark C. Chen 8738 NW 147 Lan Mianci, FL 3301		ddress (P.O. Box Number is Not Acceptable)	85 Zip Code
1. Pursuant toffice or re	to the provisions of Sections 607.1 egistered agent, or both, in the Strafamiliar with, and accept the ob-	0502 and 607,1508, Florida Stat ate of Florida Such change wa bligations of, Section 607,0505,	tutes, the above-named co s authorized by the corpo Florida Statutes.	orporation submits this statement for the purp ration's board of directors. I hereby accept th	ose of changing its registered e appointment as registered
SIGNATURE .	Signature, typed or preten name of registered	agent and the if applicable (N	OTE: Registered Agent signature re-	quired when reinstating)	DATE
2.	OF FICERS.	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TLE	DP	☐ DELETE	1.1 TITLE		Change Addition
ame	LIN , YEUN-JUNN		1.2 NAME		
TREET ADDRESS	15998 NW 49TH AVE.		1.3 STREET ADDRESS		
TY-ST-ZIP	MIAMI FL 33014	Designed 1	1.4 CITY-ST-ZIP		
TLE		☐ DELET e	21 TITLE		Change Addition
AME			2.2 NAME		
TREET ADDRESS			2.3 STREET ADDRESS		
TY- <u>ST-ZIP</u> 'LE		DELETE	2. 4 CHY-SI-ZIP 3.1 TITLE	<u> </u>	Change Addition
AME			3.2 NAME		المالية المالية المالية
REET ADDRESS			3.3 STREET ADDRESS		
TY-ST-ZIP			3.4. CITY-ST-ZIP		
TLE		DELETE	4.1 TITLE .		Change Addition
ME			4. 2 NAME		•
REET ADDRESS			4.3 STREET ADDRESS		
Y-ST-ZIP			4.4 CITY - ST - ZIP		
Œ		☐ DELETE	5.1 TITLE		Change Addition
VME			5.2 NAME		
REET ADDRESS			5.3 STREET ADDRESS		
TY-ST-ZIP			5.4 CITY - ST - ZIP		
TLE		DELETE	6.1 TITLE		ChangeAddition
VME			6.2 NAME	900002513	:=053 √222
TREET ADDRESS			6.3 STREET ADDRESS	***150.08	\u23
VTV_ CT. 710			64 CITY - ST - 7IP	<u>~~~1⊃∪.∪∪</u>	,

14. Thereby 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. Yeun-Juna Lin

FILED

May 06 1998 8:00am

Secretary of State