2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2004 8:00 am
Secretary of State
02-26-2004 90013 046 ***158.75

DOCUMENT # P98000105320

1. Entity Name
DAEWOO ELECTRONICS AMERICA INC.

Principal Place of Business	Mailing Address
8300 NW 53RD STREET 202 MIAMI FL 33166	8300 NW 53RD STREET 202 MIAMI FL 33166

MOORE CR2E034 (11/03)

2. Principal Place of Business		3. Mailing Address	
120 CHUBB AVENUE		120 CHUBB AVENUE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: LYNDHURST, NJ		City & State: LYNDHURST, NJ	
Zip: 07071	Country: USA	Zip: 07071	Country: USA

4. FEI Number 65-0881706 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired XX **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEE, CHUL 8300 NW 53RD ST STE 202 MIAMI FL 33166	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00 ✓
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE	T/S	XX Change XX Addition
NAME	LEE, CHUL		NAME	HWANG, YOUNG JOON	
STREET ADDRESS	8300 NW 53RD ST (#202)		STREET ADDRESS	120 Chubb Avenue	
CITY-ST-ZIP	MIAMI FL 33166		CITY-ST-ZIP	Lyndhurst, New Jersey 07071	
TITLE	VPTS	☐ Delete	TITLE	V	XX Change ☐ Addition
NAME	MOON, BYONG SOO		NAME	MOON, BYONG SOO	
STREET ADDRESS	10100 S.W. 77 CT		STREET ADDRESS	10100 S.W. 77 CT	
CITY-ST-ZIP	MIAMI FL 33156		CITY-ST-ZIP	MIAMI, FL 33156	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby 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 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] CHUL LEE 2-19-04 201-460-2501
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #