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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02165

(3)

FILED Apr 15 1997 8:00am Secretary of State

1. Corporation Name TRUONG QUACH, INC. Principal Place of Business Mailing Address BANG QUACH 10154 66 ST N 10454 66 ST N PINELLAS PARK FL 34666-2308 PINELLAS PARK FL 33782-2308						
				3. Date Incorporated or Qualified 07/13/1989	3a. Date of Last F 05/01/1996	Report
— ·	face of Business	2a. Mailing Address		4. FEI Number 59-2957897	⊢	pplied For
Suite, Apt	#, etc	Suite, Apt. #, etc.	4P	5. Certificate of Status Desired	□ \$8.75	ot Applicable Additional
City & Stat	le	City & State		6. Election Campaign Financing		equired May Be
23		28		Trust Fund Contribution		to Fees
Zip	Country	Zip	Country 30	8. This corporation has liability for Florida Statutes	intangible tax under s	s. 199.032,
24	25 9. Name and Address of Cu	29 errent Registered Agent	1301	10. Name and Address of New Re		
QUA	ACH, BANG		81 Name			
10454 66 ST N PINELLAS PARK FL 33585			82 Street Ad	ddress (P.O. Box Number is Not Acceptal	ble)	
			84 City		FL 85 Zip	Code
11. Pursuant office or i	to the provisions of Sections 607 registered agent, or both, in the S	.0502 and 607.1508, Florida Stat State of Florida. Such change wa	utes, the above-named c s authorized by the corpo	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing of the appointment as	its registered registered
11. Pursuant office or agent. It a	am familiar with, and accept the o	obligations of, Section 607,0505, I	utes, the above-named c s authorized by the corpo Florida Statutes. OTE. Registered Acent elignature re		DATE	
agent. Fa	Separate types or princed has a chargestern OFFICERS	of agent and little if applicable. (No. 1)	Florida Statutes. OTE: Registered Agent signature re	equired when reinstating)	DATE	
agent. Fa SIGNATURE 112. THE NAME	Signature hypothelprined has a chargister OFFICERS PTD OUACH, BANG	chingations of, Section 607,0505, Indiagent and title 4 applicable. IN	OTE: Reg stered Acent algosture re 13. 11 TITLE 12 NAME	equired when reinstating)	DATE CERS AND DIRECTO	RS IN 12
Agent 18 SIGNATURE 12. THE NAME STREET ADDRESS	Signatur hyper or prined har a chiegisters OFFICERS PTD OUACH, BANG 10454 68 ST N	chingations of, Section 607,0505, Indiagent and title 4 applicable. IN	OTE: Reg stered Agent signature re 13. 11 TITLE 12 NAME 1.3 STREET ADDRESS	equired when reinstating)	DATE CERS AND DIRECTO	RS IN 12
agent. Fa SIGNATURE 112. THE NAME	Signatur spect of princed har a chargestern OFFICERS PTD OUACH, BANG 10454 66 ST N PINELLAS PARK FL SO	chingations of, Section 607,0505, Indiagent and title 4 applicable. IN	OTE: Reg stered Acent algosture re 13. 11 TITLE 12 NAME	equired when reinstating)	DATE CERS AND DIRECTO	RS IN 12
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I do 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 annual roport 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.

SIGNATURE: X STONATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/6/97

813-544-4656