**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 03, 2001 8:00 am Secretary of State DOCUMENT # P96000040862 1. Entity Name PHAT NGOC, INC. 05-03-2001 91115 006 \*\*\*150.00 Principal Place of Business Mailing Address 3005 E. 11TH COURT 3005 E. 11TH COURT PANAMA CITY FL 32401 PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-3379728 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NGUYEN, BUI VAN Street Address (P.O. Box Number is Not Acceptable) 3005 E. 11TH COURT PANAMA CITY FL 32401 Zip Code City 114 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Delete Vice-President NAME NGUYEN, BUI VAN NAME Ngan Nguyen STREET ADDRESS 3005 E. 11TH COURT STREET ADDRESS 3906 E. 14th Street CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32401 Panama City, FL 32401 ☐ Change ☐ Delete ▼ Addition Secretary NAME Mylinh Nguyen STREET ADDRESS STREET ADDRESS 539 School Ave CITY - ST-ZIP CITY-ST-ZIP Panama City, FL 32401 ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ 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-7IP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bui Van Nguyen 4/27/01 850-785-5951