## 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N29261

Entity Name: GIAO-HOI PHAT-GIAO TANG-GIA KHAT-SI THE-GIOI, INC.

**FILED** Jan 27, 2016 **Secretary of State** CC7838059158

## **Current Principal Place of Business:**

5607 TOWN N COUNTRY BLVD.

TAMPA FL 33615

## **Current Mailing Address:**

5607 TOWN N COUNTRY BLVD. TAMPA, FL 33615 US

FEI Number: 46-5330079 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MEACHAM, BART W. 308 E FLYMOUTH STREET TAMPA, FL 33603 US

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: MEACHAM, BART W. 01/27/2016

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title VP, CHAIRMAN, DIRECTOR

Name NGUYEN, CO XUAN Name TRAN, HOA VAN

5607 TOWN N COUNTRY BLVD. 5607 TOWN N COUNTRY BLVD. Address Address

City-State-Zip: TAMPA FL 33615 TAMPA FL 33615 City-State-Zip:

CONTROLLER, DIRECTOR Title Title VΡ

Name TRUONG, DANNY DO, BA Name

Address 12042 MOUNTBATTEN DR Address 5607 TOWN N COUNTRY BLVD.

City-State-Zip: TAMPA FL 33626 City-State-Zip: TAMPA FL 33615

Title TREASURER, DIRECTOR Title **EXECUTIVE SECRETARY** 

Name TRAN, BELE K. Name HOANG, LOAN BICH

12343 MEMORIAL HWY Address Address 5907 BUTTON QUAIL CT.

City-State-Zip: TAMPA FL 33635 TAMPA FL 33624 City-State-Zip:

Title COMMISSIONER Name TRAN, LEIGHTON

2791 TIGERS EYE PASS Address City-State-Zip: CLEAR WATER FL 33760

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

01/27/2016 SIGNATURE: HOA V TRAN ABBOT, CHAIRMAN DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date