## 2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N29261

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

FILED Sep 12, 2020 Secretary of State 2956666081CC

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

5607 TOWN N COUNTRY BLVD.

**TAMPA, FL 33615** 

## **Current Mailing Address:**

8408 N WILLOW AVE TAMPA FL 33604 US

FEI Number: 46-5330079 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

SHOEMAKER, HANNA 8408 N WILLOW AVE TAMPA, FL 33604 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: HANNA SHOEMAKER 09/12/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title VP, DIRECTOR

NameTRAN, HOA VNameHO, PHUONG HOANGAddress8408 N WILLOW AVEAddress8408 N WILLOW AVECity-State-Zip:TAMPA FL 33604City-State-Zip:TAMPA FL 33604

Title TREASURER, DIRECTOR Title DIRECTOR

Name TRAN, BELE KIM Name TRUONG, DANNY
Address 8408 N WILLOW AVE Address 8408 N WILLOW AVE
City-State-Zip: TAMPA FL 33604 City-State-Zip: TAMPA FL 33604

City-State-Zip: TAMPA FL 33604 City-State-Zip: TAMPA FL 3360

Title SECRETARY, DIRECTOR Title DIRECTOR

NameHOANG, LOANNameTRAN, LEIGHTONAddress8408 N WILLOW AVEAddress8408 N WILLOW AVECity-State-Zip:TAMPA FL 33604City-State-Zip:TAMPA FL 33604

Title ASST. SECRETARY, DIRECTOR

Name SHOEMAKER, HANNA
Address 8408 N WILLOW AVE
City-State-Zip: TAMPA FL 33604

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.

SIGNATURE: HANNA SHOEMAKER ASST. SECRETARY 09/12/2020

Electronic Signature of Signing Officer/Director Detail

Date