## **FILE NOW: FILING FEE IS \$61.25**



## Sandra B. Mortham

	FILE	NOW: FIL	ING FE	E IS \$61.	25				_ 1
	NONPROFIT			FLORIDA DE		Apr 10 Secret			
	CORPORATION			Sandı		Sacrat			
ANNUAL REPORT 1997				Sec DIVISION		500	ICt		
		70004							
1. Corporation	MENT # on Name	76084	2	(5)					
VIETN	IAMESE ALLIAN	NCE CHURC	H, INC.				}		
				·					
Principal Plac	ce of Business		Mailin	g Address				1 (KD111 (DD18 D1161 ED	### ##### <b>#</b>
514 CHARLOT AUBURNDALE				HARLOTTE ROAI INDALE FL 3382					
							3.	Date incorporated or	Qualific
9 Principal I	Place of Business		100 14	ilina Addrosa				11/25/1981 FEI Number	
2. Principal F	TAUS OF DUSINESS		26 Za. Ma	ailing Address			4.	59-2362157	
Sulte, Apt	. #, etc.		Şu	ite, Apt. #, etc.			5.	Certificate of Status [	Desired
City & Sta	te		27 Cit	y & State		<del></del>		Election Campaign Fi	
23	<u> </u>	<del></del>	28		····		ı	Trust Fund Contributi	-
Zip	25	ountry	29 Zir	)	30	ountry	l l	This corporation has Florida Statutes	liability 1
		ddress of Curre		d Agent	1001	81 Name		Name and Address	of New
AUBUR	IARLOTTE ROAD NDALE FL 33823		**	F00 51 1 10		83 84 City		O. Box Number is No	
514 CH AUBUR	IARLOTTE ROAD NDALE FL 33823		02 and 617.1 e of Florida. S gations of, Se	508, Florida St Such change w ction 617.0503	atutes, the as authoriz , Florida St	83 84 City		submits this stateme	
514 CH AUBUR	IARLOTTE ROAD NDALE FL 33823 to the provisions of registered agent, or am familiar with, and	Sections 617.05 both, in the State d accept the oblig				84 City  above-named ed by the corpatutes.	corporation oration's b	n submits this stateme oard of directors. I he	
514 CH AUBUR 11. Pursuant office or agent. I s SIGNATURE	IARLOTTE ROAD NDALE FL 33823	Sections 617.05 both, in the State d accept the oblig	ont and title If app	elicable. I	NOTE: Register	83  84 City  above-named ed by the corp atutes.	corporation oration's b	n submits this stateme oard of directors. I he	ent for the
514 CH AUBUR 11. Pursuant office or agent. I a SIGNATURE 12.	IARLOTTE ROAD NDALE FL 33823  I to the provisions of registered agent, or am familiar with, and Signature, typod or printed	Sections 617.05 both, in the State of accept the oblig dname of registered ag OFFICERS AN	ont and title If app	olicable.	NOTE: Register 13	84 City above-named ed by the correctutes.	corporation oration's b	n submits this stateme oard of directors. I he	ent for the
514 CH AUBUR 11. Pursuant office or agent. I s SIGNATURE 12.	IARLOTTE ROAD NDALE FL 33823  I to the provisions of registered agent, or am familiar with, and Signature, typod or printed PD LE, JOHN VAI	Sections 617.05 both, in the State of accept the oblig dname of registered ag OFFICERS AN	ont and title If app	elicable. I	NOTE: Register 13 1.1 1.2	83  84 City  above-named ed by the corp atutes.	corporation oration's b	n submits this stateme oard of directors. I he	ent for the reby ac
514 CH AUBUR 11. Pursuant office or regent. I e SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed PD LE, JOHN VAI 5788 STATE I WINTER HAVI	Sections 617.05 r both, in the State of accept the oblig d name of registered ag OFFICERS AN N RD 542W	ont and title If app	olicable	NOTE: Register 13 1.1 1.2 1.3 1.4	83 84 City above-named ed by the correctives.  ed Agent signature TITLE NAME STREET ADDRESS CHY-ST-ZIP	corporation oration's b	n submits this stateme oard of directors. I he	ent for the reby ac
514 CH AUBUR 11. Pursuant office or agent. I e SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL	ont and title If app	elicable. I	NOTE: Register  13  1.1  1.2  1.3  1.4  2.1	above-named ed by the corretutes.  ad Agent signature TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	corporation oration's b	n submits this stateme oard of directors. I he	ent for the reby ac
514 CH AUBUR 11. Pursuant office or regent. I e SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL	ont and title If app	olicable	13 1.1 1.2 1.3 1.4 2.1 2.2	83 84 City above-named ed by the correctives.  ed Agent signature TITLE NAME STREET ADDRESS CHY-ST-ZIP	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	ent for the reby ac
514 CH AUBUR  11. Pursuant office or agont. I e SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI	Sections 617.05 r both, in the State d accept the oblig  OFFICERS AN  N RD 542W EN FL  VAN SON DR.	ont and title If app	Olicable  RS  DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2.	above-named ed by the corrections.  and Agent signature  TITLE  NAME  STREET ADDRESS  City-St-Zip  TITLE  NAME	corporation oration's b	n submits this stateme oard of directors. I he	ent for the reby ac
514 CH AUBUR  11. Pursuant office or a gont. I s SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD	Sections 617.05 r both, in the State d accept the oblig one of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL	ont and title If app	olicable	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1	above-named ed by the corrections and Agent signature.  Intle NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	ent for the reby ac
514 CH AUBUR 11. Pursuant office or agent. I e SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN	Sections 617.05 r both, in the State d accept the oblig one of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL	ont and title If app	Olicable  RS  DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2	above-named ed by the corrections and Agent signature.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	ent for the reby ac
514 CH AUBUR  11. Pursuant office or agent. I e signature  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN 295 LIVE OAK	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	Olicable  RS  DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3	above-named ed by the corrections and Agent signature.  Intle NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	338
514 CH AUBUR  11. Pursuant office or agent. I e signature  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	Olicable  RS  DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.4 4.1	B4 City  above-named ed by the corrections signature.  Title  NAME  STREET ADDRESS  City-St-ZiP	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	338
514 CH AUBUR  11. Pursuant office or agent. I e signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN 295 LIVE OAK	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.1 4.1 4.2	B4 City  above-named ed by the corrected Agent signature  atutes.  and Agent signature  atutes.  at	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	338
514 CH AUBUR  11. Pursuant office or agent. I e SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN 295 LIVE OAK	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.1 4.2 4.3	B4 City  above-named ed by the corrected signature.  Total Agent signature.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	338
514 CH AUBUR  11. Pursuant office or agent. I e signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN 295 LIVE OAK	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.1 4.2 4.3 4.4	B4 City  above-named ed by the corrected Agent signature  atutes.  and Agent signature  atutes.  at	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	338
514 CH AUBUR  11. Pursuant office or agent. I e signature  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN 295 LIVE OAK	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	DELETE  DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.1 4.2 4.3 4.4 5.1	B4 City  above-named ed by the corrected Agent signature  atutes.  and Agent signature  atutes.  at	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	338
514 CH AUBUR  11. Pursuant office or sgent. I e signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN 295 LIVE OAK	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	DELETE  DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.1 4.2 4.3 4.1 5.1 5.21 5.33	B3  B4 City  above-named ed by the corp atutes.  and Agent signature	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	ent for the
514 CH AUBUR  11. Pursuant office or agent, I e signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	IARLOTTE ROAD NDALE FL 33823  To the provisions of registered agent, or am familiar with, and signature, typed or printed  PD LE, JOHN VAI 5788 STATE I WINTER HAVI VSD PHAN, GOM N 120 TATTERS AUBURNDALE TD NGUYEN, TUN 295 LIVE OAK	Sections 617.05 r both, in the State d accept the oblig d name of registered ag OFFICERS AN N RD 542W EN FL VAN SON DR. E FL YEN DO ( LANE	ont and title If app	DELETE  DELETE  DELETE	NOTE: Register  13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.4 4.1 4.1 4.2 4.3 4.4 5.1 5.2 5.4	B4 City  above-named ed by the corrected signature.  Total Agent signature.  Title  NAME  STREET ADDRESS  City-S1-ZiP  Title  NAME	corporation oration's b	n submits this stateme oard of directors. I he reinstating) DDITIONS/CHANGES	338

LE, JOHN VAN
514 CHARLOTTE ROAD
<b>AUBURNDALE FL 33823</b>

FILED							
Apr 10 1997 8:00am							
Secretary of State							



Yes No

This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

3a. Date of Last Report

04/29/1996

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

				1				
			84	City	•	FL	85 Zip	Code
11. Pursuant office or r	to the provisions of Sections 617,0502 and 617,150 registered agent, or both, in the State of Florida. Suc im familiar with, and accept the obligations of, Secti	8, Florida Statutes, ch change was auth on 617.0503, Florid	the above orized by a Statutes	e-name the co	ed corporation submits this statem orporation's board of directors. I h	pent for the purpose o	I changing i	ts registered registered
SIGNATURE .	Signature, typod or printed name of registered agent and title if applica	INOTE: Bo	nistered Ana	ot signate	ure required when rainstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.	- Congrida		ES TO OFFICERS AND	DIRECTOR	7S IN 12
TITLE :	PD	DELETE	1.1 TITLE				Change	Addition (
NAME	LE, JOHN VAN		1.2 NAME					17
STREET ADDRESS	5788 STATE RD 542W		1.3 STREET	ADDRESS	s			
CITY-ST-ZIP	WINTER HAVEN FL		1.4 C/TY-S	T · ZIP	)	33880		13
TITLE	VSD	DELETE	2.1 TITLE				Change	Addition (
NAME .	PHAN, GOM VAN		2.2 NAME		-			1
STREET ADDRESS	120 TATTERSON DR.	ì	2.3 STREET	ADDRESS	PATTERSON			Ĭ
CITY-ST-ZIP	AUBURNDALE FL		2 4 City-S	ST-ZIP		33823		
TITLE	TD	DELETE	3.1 TITLE				Change	Addition
NAME	nguyen, Tuyen do		3.2 NAME					
STREET ADDRESS	295 LIVE OAK LANE		3.3 STREET	ADDRESS	ş			
CITY-ST-ZIP	WINTER HAVEN FL		3.4. CITY - S	1 - 2/P		<u> 33880 </u>		
TITLE		DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAME		1			Į.
STREET ADDRESS			4.3 STREET	ADDRESS	ş .			
CITY-ST-ZIP			4.4 CITY-ST	r-ZIP				
TITLE		DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					ĺ
STREET ADDRESS			5.3 STREET	address	; <u> </u>			[:
CITY-ST-ZIP			5.4 CITY - ST	T-ZIP				
TITLE	·	☐ DELETE	6.1 TITLE	-			Change	☐ Addition
NAME			6.2 NAME		!			
STREET ADDRESS	- <del>1</del>		6.3 STREET	address	<b>5</b>			

64 CITY-ST-ZIP

14. 1 do hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the lam 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 in Block 12 or Block 12 or Block 12 or on an attachment with an address.