

**2009 LIMITED PARTNERSHIP ANNUAL REPORT**

**FILED  
Apr 13, 2009  
Secretary of State**

DOCUMENT# A00000001140

Entity Name: NGUYEN LE, LTD.

**Current Principal Place of Business:**

945 S. BAYSHORE BLVD.  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

**Current Mailing Address:**

945 S. BAYSHORE BLVD.  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

FEI Number: 59-3659724      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NGUYEN, GIAO V  
945 S. BAYSHORE BLVD.  
SAFETY HARBOR, FL 34695      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #:  
Name: VAN NGUYEN, GIAO  
Address: 945 S. BAYSHORE BLVD.  
City-St-Zip: SAFETY HARBOR, FL 34695  
Document #:  
Name: THU LE, THUY  
Address: 945 S. BAYSHORE BLVD.  
City-St-Zip: SAFETY HARBOR, FL 34695

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:  
  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: GIAONGUYEN

GP

04/13/2009

Electronic Signature of Signing General Partner

\_\_\_\_\_ Date