

## **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F04000001194

**FILED**  
**Dec 08, 2010**  
**Secretary of State**

**Entity Name:** NETWORK CAPITAL FUNDING CORPORATION

**Current Principal Place of Business:**

2040 MAIN STREET  
#420  
IRVINE, CA 92614

**New Principal Place of Business:**

5 PARK PLAZA  
#800  
IRVINE, CA 92614

**Current Mailing Address:**

2040 MAIN STREET  
#420  
IRVINE, CA 92614

**New Mailing Address:**

5 PARK PLAZA  
#800  
IRVINE, CA 92614

**FEI Number:** 47-0873092

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPDIRECT AGENTS, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: NGUYEN, TRI M CEO  
Address: 5 PARK PLAZA, #800  
City-St-Zip: IRVINE, CA 92614

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TRI NGUYEN

C.E.

12/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date