

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J53090

FILED  
Apr 19, 2011  
Secretary of State

Entity Name: LE-HUU PARTNERS, P.A.

**Current Principal Place of Business:**

4401 N. ORANGE BLOSSOM TRL.  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

**Current Mailing Address:**

4401 N. ORANGE BLOSSOM TRL.  
ORLANDO, FL 32804 US

**New Mailing Address:**

FEI Number: 59-2770626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LE-HUU, KHA  
1200 DELANEY AVENUE  
ORLANDO, FL 32806 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: PD  
Name: LE-HUU, KHA  
Address: 1200 DELANEY AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: VT  
Name: LE-HUU, KHA  
Address: 1200 DELANEY AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: T  
Name: QUOC-BAD, LE-HUU T  
Address: 117 E COPELAND DR  
City-St-Zip: ORLANDO, FL 32806

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: KHA LE-HUU

PRES

04/19/2011

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

\_\_\_\_\_ Date