

4/23

FILED

Jun 29, 2001 8:00 am
Secretary of State

04-23-2001 90100 039 ****70.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000001880

1. Entity Name

VIETNAMESE COMMUNITY OF PENSACOLA, INC., A NONPR

Principal Place of Business

516 TAMPICO CT.
PENSACOLA FL 32506

Mailing Address

516 TAMPICO CT.
PENSACOLA FL 32506

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

VUONG, GIAU VAN
516 TAMPICO CT.
PENSACOLA FL 32506

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PO	☐ Delete
NAME	VUONG, GIAU VAN	
STREET ADDRESS	516 TAMPICO CT.	
CITY - ST - ZIP	PENSACOLA FL 32506	

TITLE	VD	☐ Delete
NAME	BUI, LY	
STREET ADDRESS	516 TAMPICO CT.	
CITY - ST - ZIP	PENSACOLA FL 32506	

TITLE	VD	☐ Delete
NAME	NGUYEN, KIM THUAN TRAN	
STREET ADDRESS	516 TAMPICO CT.	
CITY - ST - ZIP	PENSACOLA FL 32506	

TITLE	SD	☒ Delete
NAME	NGUYEN, NGHIA HUU	
STREET ADDRESS	516 TAMPICO CT.	
CITY - ST - ZIP	PENSACOLA FL 32506	

TITLE	SD	☐ Delete
NAME	NGUYEN, TRUNG BA	
STREET ADDRESS	516 TAMPICO CT.	
CITY - ST - ZIP	PENSACOLA FL 32506	

TITLE	TD	☐ Delete
NAME	TRAN, HANH HUU	
STREET ADDRESS	516 TAMPICO CT.	
CITY - ST - ZIP	PENSACOLA FL 32506	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GIAU VAN VUONG

6/22/01

(850) 457-4252

Date

Daytime Phone #