

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009909

FILED
Apr 15, 2009
Secretary of State

Entity Name: TU VIEN PHUC THIEN INC.

Current Principal Place of Business:

38753 INEZ AVE
ZEPHYRHILLS, FL 33542

New Principal Place of Business:

Current Mailing Address:

38753 INEZ AVE
ZEPHYRHILLS, FL 33542

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANG, QUANG C
4040 W. WATERS AVE
1600
TAMPA, FL 33614 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: P () Delete
Name: HUYNH, LUOI
Address: 38753 INEZ AVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP () Delete
Name: LE, NHUY T
Address: 1922 E CRENSHAW ST
City-St-Zip: TAMPA, FL 33610

Title: T () Delete
Name: HUYNH, HUNG V
Address: 8901 ROSEBANK CT
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUOI HUYNH

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date