

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000043

FILED
Jul 10, 2009
Secretary of State

Entity Name: MEKONG RELIEF INC

Current Principal Place of Business:

809 WOODCREST AVE
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

809 WOODCREST AVE
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 20-4036866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SUHANOVSKY, GEORGE
809 WOODCREST AVE
CLEARWATER, FL 33756 US

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: SUHANOVSKY, GEORGE
Address: 809 WOODCREST AVE
City-St-Zip: CLEARWATER, FL 33756

Title: VP () Delete
Name: NGUYEN, HUNG
Address: 2336 WILLOW TREE TRAIL
City-St-Zip: CLEARWATER, FL 33763

Title: SEC () Delete
Name: SUHANOVSKY, MICHAEL
Address: 710 COLORADO ST 3-E
City-St-Zip: AUSTIN, TX 78701

Title: TREA () Delete
Name: NGUYEN, YOUNG
Address: 2336 WILLOW TREE TRAIL
City-St-Zip: CLEARWATER, FL 33763

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:

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: GEORGE SUHANOVSKY

P

07/10/2009

Electronic Signature of Signing Officer or Director

Date