

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 JAN 27 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N35623**

1. Corporation Name

**VIETNAMESE VETERANS ASSOCIATION
OF CENTRAL FLORIDA, INC**

2. Principal Office Address

7434 BROWNWOOD CT.

Suite, Apt. #, etc.

3. Mailing Office Address

9434 BROWNWOOD CT.

Suite, Apt. #, etc.

City & State

ORLANDO FL

City & State

ORLANDO FLORIDA

Zip

32765

Country

SEMINOLE

Zip

32765

Country

SEMINOLE

REINSTATEMENT

99-2000

**4. Date Incorporated or Qualified
To Do Business in Florida**

4-24-1996

5. FEI Number

000003119960

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

QUY VAN TRAN

000003119960-7

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

9434 BROWNWOOD CT.

02/02/00 01003-005

*****297.50 ***297.50**

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32765

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Quynh Tran

REGISTERED AGENT MUST SIGN

Date **Jan. 7, 2000**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D/C	QUY VAN TRAN	9434 BROWNWOOD CT.	ORLANDO, FL 32765
V/D	CANG H. NGUYEN	1080 LEJAY ST.	ORLANDO, FL 32825
V/D	MAO V. CHU	4851 WILLOW AVE.	ORLANDO, FL 32808
S/D	AN NGOC CHAU	1416 PRAIRIE LAKE BLVD.	ORLANDO, FL 32746
T/D	DAO H. BUI	755 TIMORE RD.	ORLANDO, FL 32804
			KE

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: **Quynh Tran, QUY VAN TRAN, PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 7, 2000

Date

407-677-8118

407-836-2064

Daytime Phone #

CR2001 (9/99)