

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2002 8:00 am**  
**Secretary of State**

**DOCUMENT # N37882**

1. Entity Name

**TAM-BAO TEMPLE, INC.**

03-10-2002 90737 001 \*\*\*\*\*8.75  
 03-10-2002 90737 002 \*\*\*\*\*61.25

Principal Place of Business 4766 N ROCK SPRINGS RD APOPKA FL 32712	Mailing Address 4766 N ROCK SPRINGS RD APOPKA FL 32712
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- 69046



DO NOT WRITE IN THIS SPACE

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 <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**8. Name and Address of Current Registered Agent**

REV. VIEN HANH SANVARO  
 4766 N ROCK SPRINGS RD  
 APOPKA FL 32712

**7. Name and Address of New Registered Agent**

Name: REV. NGUYEN QUANG TUAN SANVARO  
 Street Address (P.O. Box Number is Not Acceptable):  
4766 - N - ROCK SPRINGS - RD.  
4766 - N - ROCK SPRINGS - RD.  
 City: APOPKA FL Zip Code: 32712

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: REV. NGUYEN QUANG TUAN (SANVARO) 4-4-02  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Department of State</b>
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**10. OFFICERS AND DIRECTORS**

TITLE	D	<input checked="" type="checkbox"/> Delete	SANVARO, VIEN HANH T 4766 N ROCK SPRING RD APOPKA FL
TITLE	D	<input type="checkbox"/> Delete	LAM VAN, PHUC 5510 AXIOM AVE ORLANDO FL 32809
TITLE	D	<input type="checkbox"/> Delete	NGUYEN, ELVIS 1048 34TH ST. ORLANDO FL
TITLE	D	<input type="checkbox"/> Delete	TRAN, THUYHANG 5316 POINTE VISTA CIR APT #203 ORLANDO FL 32839
TITLE	D	<input type="checkbox"/> Delete	NGUYEN, THU CUC 358 SOUTHERN CHARM DR. ORLANDO FL 32807
TITLE	D	<input type="checkbox"/> Delete	TRAN, LE THUY LIEN 358 SOUTHERN CHARM DR. ORLANDO FL 32807

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	SANVARO, NGUYEN Q. TUAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	4766 - N - ROCK SPRING - RD APOPKA, FL. 32712
TITLE	LAM - VAN - PHUC	<input type="checkbox"/> Change <input type="checkbox"/> Addition	5510 - AXIOM - AVE ORLANDO, FL. 32809
TITLE	NGUYEN ELVIS	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1048 - 34TH - ST ORLANDO, FL. 32839
TITLE	TRAN, THUYHANG	<input type="checkbox"/> Change <input type="checkbox"/> Addition	5316 - POINTE VISTA CIR APT #203 ORLANDO, FL. 32839
TITLE	NGUYEN THU CUC	<input type="checkbox"/> Change <input type="checkbox"/> Addition	358 - SOUTHERN CHARM - DR ORLANDO, FL. 32807
TITLE	TRAN, LE THUY LIEN	<input type="checkbox"/> Change <input type="checkbox"/> Addition	358 - SOUTHERN CHARM - DR ORLANDO, FL. 32807

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 REQUIRED 4-4-02  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)