

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000004687

1. Corporation Name

THE VIETNAMESE POLITICAL PRISONERS ASSOCIATION,
INCORPORATED

Principal Place of Business

1001 NW 45TH COURT
FORT LAUDERDALE FL 33309

Mailing Address

1001 NW 45TH COURT
FORT LAUDERDALE FL 33309

FILED

99 FEB -3 PM 4:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business 21 6241 SW 9th STREET Suite, Apt. #, etc. 22 City & State 23 NORTH LAUDERDALE FL Zip 24 33068 25 USA	2a. Mailing Address 26 6241 SW 9th STREET Suite, Apt. #, etc. 27 City & State 28 NORTH LAUDERDALE, FL Zip 29 33068 30 USA	3. Date Incorporated or Qualified 09/06/1996 4. FEI Number 65-0732722 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent

HON NGOC NGUYEN
1001 NW 45TH COURT
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name CANG CHI PHAN	82 Street Address (P.O. Box Number is Not Acceptable) 6241 SW 9th STREET	83	84 City NORTH LAUDERDALE FL	85 Zip Code 33068
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Cang Chi Phan

CANG CHI PHAN

JANUARY 31, 1999

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DC	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	DC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HON NGOC NGUYEN		1.2 NAME	CANG CHI PHAN			
STREET ADDRESS	1001 NW 45TH COURT		1.3 STREET ADDRESS	6241 SW 9th STREET			
CITY-ST-ZIP	FORT LAUDERDALE FL 33309		1.4 CITY-ST-ZIP	NORTH LAUDERDALE FL 33068			
TITLE	DVC	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	DVC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	AN NGOC LY		2.2 NAME	LONG TAN PHAM			
STREET ADDRESS	9066 W. ATLANTIC BLVD, BLDG 421		2.3 STREET ADDRESS	3470 SW 2nd COURT			
CITY-ST-ZIP	CORAL SPRINGS FL 33071		2.4 CITY-ST-ZIP	DEERFIELD BEACH FL 33442			
TITLE	DS	<input type="checkbox"/> DELETE	3.1 TITLE	DS	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TRUONG THANH NGUYEN		3.2 NAME	TRUONG THANH NGUYEN			
STREET ADDRESS	6842 BROADMOOR		3.3 STREET ADDRESS	6842 BROADMOOR			
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068		3.4 CITY-ST-ZIP	NORTH LAUDERDALE FL 33068			
TITLE	DT	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HAI TRUNG VO		4.2 NAME	TY HOC TRAN			
STREET ADDRESS	551 SW 62ND TERRACE		4.3 STREET ADDRESS	1400 SW 82 AVENUE			
CITY-ST-ZIP	MARGATE FL 33068		4.4 CITY-ST-ZIP	NORTH LAUDERDALE FL 33068			
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE				
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE				
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cang Chi Phan

CANG CHI PHAN

JANUARY 31, 1999 (954) 979 5902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0037064

CR2E037 (11/98)