

FILED
Jul 24, 2002 8:00 am
Secretary of State

05-28-2002 91760 028 ****75.00

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N 960000004607

1. Entity Name

THE VIETNAMESE POLITICAL PRISONERS
ASSOCIATION, INCORPORATED

39567

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4412 NW 43rd ST

4412 NW 43rd ST

City & State

City & State

COCONUT CREEK, FL

COCONUT CREEK, FL

Zip

Country

Zip

Country

33073

BROWARD

33073

BROWARD

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name TRUONG THANH NGUYEN

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

4412 NW 43rd ST

City

COCONUT CREEK

FL

Zip Code

33073

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

TRUONG THANH NGUYEN

TRUONG THANH NGUYEN

5-21-2002

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution.

☒

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DC
NAME TRUONG THANH NGUYEN
STREET ADDRESS 4412 NW 43rd ST
CITY-ST-ZIP COCONUT CREEK, FL 33073

TITLE DVC
NAME THANH NGOC LE
STREET ADDRESS 321 NW 46 ST
CITY-ST-ZIP POMPAHO BEACH, FL 33064

TITLE DVC
NAME LONG TAN PHAM
STREET ADDRESS CENTURY VILLAGE MARKHAM AVE
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE DI
NAME ANH TRUONG
STREET ADDRESS 4127 EASTRIDGE CIR
CITY-ST-ZIP POMPAHO BEACH, FL 33064

TITLE DS
NAME NGAN LE
STREET ADDRESS 10855 GALANAD ST
CITY-ST-ZIP BONAPARTON, FL 33428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

TRUONG THANH NGUYEN

TRUONG THANH NGUYEN

Date

Daytime Phone #