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

Ui	NIFORM BUSINE	SS REPORT	(UBR)				
DOCUMENT # N9400004687 1. Entity Name The V: etnamese political Prisoners ALSON INC.				04 MAR 10 A.	₩. 56		
	DO NOT WRITE			atalas E., F			
2. Principal Place of Business 3. Mailing Address			<u> </u>				
Suite, Apit. #, etc. 4412 NW 43 RD ST 1		Suite, Apt. #, etc.	Suite. Apt. #, etc. 4412 NW 43 RD ST		DO NOT WRITE IN THIS SPACE		
City & State		Colonul CREEK .FL		A CCI Minerale and	4. FEI Number Applied For Not Applicable		
Zip	Country	Zìp	Country	E. Castillanta of Status I	Desired [777 \$8.	75 Additional	
<u>33</u> 6	73 BROWARD	33073	BROWAR	, D 7Name and Address v	- Fee	Required ent	
Name TRUONS THANH NGUYEN							
DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable)							
				12 NW H3 RD ST			
				CONUT CREEK	FL	Zip Code 33°573	
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE CLUONANAL TRUONG THANH NGUYEN 3-07-2004							
SIGNATURE _	Signature, typed or printed the profession of agents FEE IS \$61.25 Initial, or Amended UBR	nd title il applicable (NOTE: 9. Election Carm Trust Fund Co	Registered Agent signature	\$5.00 May Be	Make Check Pa	ayable to	
10.	OFFICERS AND DIF	ECTORS				The state of the s	
THTLE	DC	<i>y</i>	TITLE		<u></u>		
NAME STREET ADDRESS	TRUONG THAI		NAME STREET ADDRESS				
CITY-ST-ZIP	EOCONUT CREE	K, FL 33073	CITY-ST-ZIP	5000E	10235159	5 5.1111	
TITLE NAME STREET ADDRESS	DVC THANH NGOO 321 NW 46	ST ST	NAME STREET ADDRESS		1000 007 4441		
CITY-ST-ZIP	POMPANO BEA	CH, FL-33064	CITY-ST-ZIP TITLE			-	
NAME	VC LONG TAN F	HAM	NAME			ļ	
STREET ADDRESS CITY-ST-ZIP	CENTURY VILLA DEERTIED BEAC	IGE MARKHAM.I H:TL33442	3 STREET ADDRESS CITY-ST-ZIP	DO N	OT WRITI	E ,	
TITLE NAME	DS		TITLE NAME	IN TE	IN THIS SPACE		
STREET ADDRESS	SS 10855 GALANAD ST		STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON	FC 33428	CITY-SI-ZIP			9.4 S	
NAME	ANHTRICONG		NAME				
STREET ADDRESS CITY-ST-ZIP	H127 EASTRI	DEE CIRCLE	STREET ADDRESS CITY-ST-ZIP				
TITLE	T THE BE	***/ *** 27 ** **	FITLE NAME	· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
12. I hereby of indicated of the cor	pertify that the information supplied with on this report or supplemental report is portation or the receiver or trustee empirit with an address, with all other like entered the control of the control	true and accurate and that movered to execute this report	the exemption state by signature shall ha	ve the same legal effect as if ma	de under oath; that i am a	an officer or director	

SIGNATURE: INDICATE TRUCKS THANH NOUYEN 3-07-04.