

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000004893

FILED
Jan 09, 2002 8:00 AM
Secretary of State

Entity Name: VIETNAMESE AMERICAN COMMUNITY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

133 DOCKSIDE TERRACE
WESTON, FL 33327 US

New Principal Place of Business:

Current Mailing Address:

133 DOCKSIDE TERRACE
WESTON, FL 33327 US

New Mailing Address:

FEI Number: 65-1024291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NGUYEN, TAP A MD
Address: 133 DOCKSIDE TERRACE
City-St-Zip: WESTON, FL 33327

Title: VD () Delete
Name: TRAN LE, PHUONG N
Address: 3300 UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD () Delete
Name: NGUYEN, PHUOG H
Address: 108 LOLLY WAY
City-St-Zip: N LAUDERDALE, FL 33068

Title: SD () Delete
Name: NGO, YEN N
Address: 4361 SW 108TH AVENUE
City-St-Zip: MIAMI, FL 33165

Title: TD () Delete
Name: PHI, QUAN
Address: 6035 NW 100 WAY
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAP NGUYEN

Electronic Signature of Signing Officer or Director

PD

01/09/2002

Date