2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32220

FILED Jan 19, 2009 Secretary of State

Entity Name: VIETNOW NATIONAL HEADQUARTERS, INC.

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|---|----------------------------------|---|---|--|
| 1835 BRO ROCKFOF | ADWAY RD, IL 61104 | | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 1835 BRO ROCKFOF | ADWAY RD, IL 61104 | | | | |
| FEI Number | : 36-3420947 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | l Address of | Current Registered Agent: | Name and Address | of New Registered Agent: | |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US | | | 1241 S.E 2ND STRE | UNITED PUBLISHING, INC 1241 S.E 2ND STREET DEERFIELD BEACH, FL 33441 US | |
| The above in the State | e named entity e of Florida. | submits this statement for the p | urpose of changing its register | ed office or registered agent, or both, | |
| SIGNATUI | RE: RICHAR | | | 01/19/2009 | |
| | Electro | nic Signature of Registered Age | nt | Date | |
| OFFICER | S AND DIREC | CTORS: | ADDITIONS/CHANG | SES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | P (SANDERS, RI 1811 HICKOR DIXON, IL 61 | Y LANE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | STEPHANEK, 1111 W. HARI | | Title: Name: Address: City-St-Zip: | () Change() Addition | |
| Title: Name: Address: City-St-Zip: | T (BUSCHER, TE 1035 WENON OAK PARK, IL | АН | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | S (GILIGAN, DAR 611 S. GOOD WINNEBAGO, | LING STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (AUGESTYNO\ 30W170 OXF WARRENVILL | ORD DRIVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DAVIS, JOHN |) Delete YLOR STREET 30115 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| | | | | | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICHARD SANDERS P 01/19/2009