## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000082425

TN PHAN CORP.

## **FILED** Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90306 047 \*\*\*150.00



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Principal Plac	e of Business	Mailing Address	-			-{ 1 (00)(00) (10 (6)00 (1)(1) 60(2) (0)(1) (0)(1)	i filatio tradit o	1818 11891 8111 1861
1674 EAGLE TRACE BLVD. PALM HARBOR FL 34685  1674 EAGLE TRACE BLVD. PALM HARBOR FL 34685						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed		7
						11/22/1993		\
Principal Place of Business     2a. Mailing Address						4. FEI Number	$-\Box$	Applied For
21		26				<u>59-3234148</u>		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	27			5. Certifcate of Status Desired	Fee	5 Additional Required
City & Stat	9	City & State			<del></del>	6. Election Campaign Financing		0 May Be
Zip Country		Zip Country				Trust Fund Contribution Added to Fees		
Zip			_	b. This corporation office the content year intangi			□No	
24	25 29 30  9. Name and Address of Current Registered Agent		30			Personal Property Tax.  10. Name and Address of New Registered	Yes	L_3140
9. Name and Address of Current Registered Agent					Name	To. Name and Address of New Registered	Agent	
PHAN NUONG-T								
1674 EAGLE TRACE BLVD				82	Street Addres	dress (P.O. Box Number is Not Acceptable)		
PALI	M HARBOR FL 34685		Ì	83				
			ŀ	84	City	FL	85 Zi	ip Code
44 Diseasement	to the amening of Continue COZ OCC	2 and 607 4500 Florida Statut	22 45 25				<u> </u>	ita registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.								
SIGNATURE								
				Agent	signature required v		UD DIDEC	TODE IN 42
12.	OFFICERS AND DIRECTORS 13. P		_			ADDITIONS/CHANGES TO OFFICERS A	Chang	
NAME	PHAN NUONG-T			1.1 TITLE				go (LI Addition
	ACTA FACILITATION PLAN			1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS	DALM HADDOD CI							
CITY-ST-ZIP TITLE				1.4 CITY-ST-ZIP 2.1 TITLE			Chang	e Addition
NAME	■ <sup></sup>		2.2 NA					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP					1
CITY-ST-ZIP TITLE	Part 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				-ZIP		Chang	e Addition
NAME	,   · · · · · · · · · · · · · · · · · ·						☐ 4.101,8	,
STREET ADDRESS	200			3.2 NAME 3.3 STREET ADDRESS				
CITY-ST-ZIP	•			3.4. CITY-ST-ZIP				
TITLE	DELETE			4.1 TITLE			Chang	e Addition
NAME				4. 2 NAME				
STREET ADDRESS	s			4.3 STREET ADDRESS				
CITY-ST-ZIP								
TITLE				4.4 CITY-ST-ZIP 5.1 TITLE			Chang	ie Addition
NAME (				5.1 IIILE 5.2 NAME				
STREET ADDRESS				5.3 STREET ADDRESS				
CITY-ST-ZIP				i.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITI				Chang	je 🗀 Addition
NAME			6.2 NA					
STREET ADDRESS			1		ADDRESS			
511d217551g00				 Y•ST•	i			}
			_					

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

**SIGNATURE:**