

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/13/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**APPROVED
AND
FILED**

94 AUG -9 AH 10: 57

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1994**



**FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # P93000085432 (1)

1. Corporation Name

GIA-DINH HERITAGE FOUNDATION, INC.

**Mailing Address
1845 WAKULLA WAY
ORLANDO FL 32839**

**Principal Place of Business
1845 WAKULLA WAY
ORLANDO FL 32839**

If above addresses are incorrect in any way, line through incorrect information and enter correction below

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/08/1993	3a. Date of Last Report
4. FEI Number 59-3220132	Applied For ☐ Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required ☐	6. Excess Campaign Financing Trust Fund Contribution ☐
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Mailing Address 21 1845 WAKULLA Way Suite, Apt. #, etc. 22 City & State 23 Orlando FL Zip 24 32839	2a. Principal Place of Business 26 1845 WAKULLA WAY Suite, Apt. #, etc. 27 City & State 28 Orlando FL Zip 29 32839	Country 25 Orange 30 Orange
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9. Name and Address of Current Registered Agent TRAN DE HUU 1845 WAKULLA WAY ORLANDO FL 32839	10. Name and Address of New Registered Agent 81 Name TRAN, NHAN. 82 Street Address (P.O. Box Number is Not Acceptable) 1845 WAKULLA. WAY. 83 84 City ORLANDO FL 85 Zip Code 32839
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE *Minh Lam Tran*
Signature, typed or printed name of registered agent and title of registered agent

8/3/94.

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS	
11 TITLE D	12 NAME TRAN DE HUU	11 TITLE PRESIDENT	12 NAME TRAN NHAN
13 STREET ADDRESS 1845 WAKULLA WAY	14 CITY, ST, ZIP ORLANDO FL 32839	13 STREET ADDRESS 1845 WAKULLA WAY	14 CITY, ST, ZIP ORLANDO FL 32839
21 TITLE D	22 NAME TRAN VINH THE	21 TITLE SECRETARY	22 NAME TU PHUC
23 STREET ADDRESS 1845 WAKULLA WAY	24 CITY, ST, ZIP ORLANDO FL 32839	23 STREET ADDRESS 1845 WAKULLA WAY	24 CITY, ST, ZIP ORLANDO FL 32839
31 TITLE D	32 NAME LE LAM PHUOC	31 TITLE TRAN DE HUU, TREASURER	32 NAME
33 STREET ADDRESS 1845 WAKULLA WAY	34 CITY, ST, ZIP ORLANDO FL 32839	33 STREET ADDRESS 1845 WAKULLA WAY	34 CITY, ST, ZIP ORLANDO FL 32839
41 TITLE D	42 NAME TRUONG KIEU THANH	41 TITLE	42 NAME
43 STREET ADDRESS 1845 WAKULLA WAY	44 CITY, ST, ZIP ORLANDO FL 32839	43 STREET ADDRESS	44 CITY, ST, ZIP
51 TITLE D	52 NAME TU PHUC	51 TITLE	52 NAME
53 STREET ADDRESS 1845 WAKULLA WAY	54 CITY, ST, ZIP ORLANDO FL 32839	53 STREET ADDRESS	54 CITY, ST, ZIP
61 TITLE D	62 NAME TRAN NHAN	61 TITLE	62 NAME
63 STREET ADDRESS 1845 WAKULLA WAY	64 CITY, ST, ZIP ORLANDO FL 32839	63 STREET ADDRESS	64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and true, and qualify for the exemption stated in Sections 139.121 and 139.122, 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if change or on an attached list with an address.

SIGNATURE:

Minh Lam Tran
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/94 (107) 8017. 2877
(Beason)