

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90086 014 ***158.75

DOCUMENT # P96000040862

1. Entity Name
PHAT NGOC, INC.



Principal Place of Business
3014 E. 1ST COURT
PANAMA CITY, FL 32401

Mailing Address
3014 E. 1ST COURT
PANAMA CITY, FL 32401

00013313



04122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3379728

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

NGUYEN, MYLINH
3014 E 1ST CT
PANAMA CITY, FL 32401

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P NGUYEN, BUI VAN 1751 WEDGWOOD DR HARVEY, LA 70058
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CAO, BANG 3750 WESTBANK EXPWY HARVEY, LA 70058
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST NGUYEN, SUONG 3750 WESTBANK EXPWY HARVEY, LA 70058
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Suong Nguyen**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/06 504-347-4178
Date Daytime Phone #

ATTACHMENT

500/33/3
#P96000040862

Please note:

last year when I ordered
a Certificate of Status,
the seal was missing. I
tried contact your office
many times, but failed to
reach you. Please make
sure the seal is there this
year! I need the certificate
to file with Louisiana State
