2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State

DOCUMENT # P98000017903 1. Entity Name TRAM & UYEN, INC.					02-22-2007 90004 036 ***150.00					
9832 HWY 301 S.		Mailing Address 1102 VINETREE DR BRANDON, FL 33510			400	26300				
2. Principal Place of Business - No P.O. Box # 3. Suite, Apt. #, etc.		PO Bo X 739 Suite, Apt. #, etc.		02052007 Chg-P CR2E034 (12/06)						
City & State	ico, PC	Thonotosas	sa F		4. FEI Numbe			<u> </u>	plied For Applicable	
3359	Country IAC		Country			of Status Desired		8.75 Add	itional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
NYMARK, DENNIS V 110 S. PEBBLE BEACH BLVD. SUN CITY CENTER, FL 33573				Street Address (Pourox Number is Not Acceptable)						
	named entity submits this statement for ions of registered agent.	City V		CO ed agent, or bot	h, in the State of Fl	FL orida. Lam fi	Zip Code	394 and accept		
SIGNATURE	Signature, typed or printerly type of registered agent as	VI LY VP kd title & applicable. (NOTE: Fig.	- egistered Agent algnat	ure required	when reinstating)	2/2/0) Z			
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campaign Trust Fund Contribu		\$5. Adde	00 May Be ed to Fees					
10.	OFFICERS AND E		11.		ADDITIONS/	CHANGES TO OFF	ICERS AND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS NGUYEN, UYEN T 1102 VINGTREE DR BRANDON, FL 33510	□ Delete	NAME STREET ADDRESS CITY-ST-7IP	1918	LYEN,U SR 60 Lrico, f	EAST	74	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NGUYEN, KHANH TUONG T 1202 CITRUS HILL CT SEFFNER, FL 33584	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	11918	SE 606	HANH T EAST L 33594		Change	Addition	
NAME STREET ADDRESS SULY-ST-ZIP	V LY, THANG 1102 VINGTREE DR BRANDON, FL 33510	Dehre	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1918 1918	THAN SR 60	6_		Tiange	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition	
ITTLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delcte	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition	
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo- or on an attachment with an address, w	true and accurate and that my wered to execute this report as	signature shall h	ave the s	same legal effec	t as if made under	oath; that I a	m an officer	or director	