2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

2611 LIBRA DR.

P98000098719 DOCUMENT

1. Entity Name

Principal Place of Business

5830 S. JOHN YOUNG PKY

VIETNAM INVESTMENT CORPORATION



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90098 003 ***150.00

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ORLANDO FL 32839			ORLA	ORLANDO FL 32837								
2. Principal Place of Business			3. Mail	3. Mailing Address				I IMBILMAL LID IKIDL LDIŞI DBILL DDII		ULDZ 90114 10001 7	1910 1911 1901	
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State				City & State			4.	. FEI Number 59-3546637			plied For Applicable	
Zip	Country Zip C				Count	гу	5. Certificate of Status Desired S8.75 Additional Fee Required					
	6. Name	and Address of Cu	ırrent Registere	d Agent			7.	Name and Address of New Re	gistered A	gent		
					=3==	Name						
nguyen,	Steven				ŀ	Street Address (P.O. Box Number is Not Acceptable)						
2611 LIBF	RA DR					Officer Address (F.O. Dox Mulliber is Mot Acceptable)						
	FL 32837											
						City			FL	Zip Code		
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 registere	ed agent and title if app	plicable. (NOTE:	Registered	Agent signature re	aquired when	n reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Fina Trust Fund Contribution.		Added	May Be to Fees	
10.		OFFICERS	S AND DIRECTO	RS	11.		A	ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	PSD	_		☐ Delete	TITLE					☐ Change	☐ Addition	
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STREET ADDRESS CITY-ST-ZIP	2611 Libra dr Orlando fl 32837					ST-ZIP						
TITLE	VPTD			☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	NGUYEN, STEVEN				NAME	ſ					j	
STREET ADDRESS	2611 LIBF					ET ADDRESS						
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	UNDAND	7 FL 32031		☐ Delete	TITLE	···-				☐ Change	Addition	
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CITY-ST-ZIP	-ZIP					ST-ZIP						

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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:

251-7867