2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 04, 2008 08:00 A Secretary of State

DOCL	IME	NT	#	53	0294
	JIVILI		$\boldsymbol{\pi}$	-	ひたりて

1, Entity Name VINAPRESS INC.



Principal Place of Business

4125 SW 148 TERRACE MIRAMAR, FL 33027 Mailing Address

4125 SW 148 TERRACE MIRAMAR, FL 33027



03252008

No Cha-P

CR2E034 (11/05)

4. FEI Number 65-0260864

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHU, YEN BA 4125 SW 148 TERRACE MIRAMAR, FL 33027

, ,

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)

<u>Unnnnnaar P</u>E

04/16/08-80015-007 158.75

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE NAME CHU, YEN BA STREET ADDRESS 4125 SW 148 TERRACE CITY-ST-ZIP MIRAMAR, FL TITLE CHU, BAO-KY BA NAME STREET ADDRESS 20427 WALNUT GROVE LANE CITY-ST-ZIP TAMPA, FL 33647 TITLE CHU, BAO-ANH BA STREET ADDRESS 4125 SW 148 TERRACE MIRAMAR, FL 33027 CITY-ST-ZIP TITLE CHU, MINH-TAM T NAME STREET ADDRESS 6239 HEDGESPARROWS LN CITY-ST-ZIP SANFORD, FL 32771 TITLE NGHIEM, NHAT HONG NAME 4125 SW 148 TERR STREET ADDRESS CITY-ST-ZIP MIRAMAR, FL 33027 TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 all other like empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 1, 2008

Daytime Phone *