2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **V30059** Apr 10, 2000 8:00 am Secretary of State 1. Entity Name DINH ENTERPRISES, INC. 04-10-2000 90072 028 ***150.00 Principal Place of Business Mailing Address 5720 LAKE UNDERHILL RD. 5720 LAKE UNDERHILL RD. ORLANDO FL 32807-4310 ORLANDO FL 32807 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3118914 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VAN THI HONG, TRAN Street Address (P.O. Box Number is Not Acceptable) 5720 LAKE UNDERHILL RD. ORLANDO FL 32807 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ___ Addition ☐ Change ☐ Delete TITLE TRAN VAN THI HONG NAME NAME STREET ADDRESS STREET ADDRESS **5720 LAKE UNDERHILL RD** CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL ☐ Addition Change ☐ Delete TITLE TITLE TRAN VAN THI HONG NAME NAME STREET ADDRESS 5720 LAKE UNDERHILL RD. STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ORLANDO FL Addition ☐ Delete TITLE DINH BANG VAN DIAH, RANG VAN NAME NAME 5720 LAKE underthu LD STREET ADDRESS 5720 LAKE UNDERHILL RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL FIR ☐ Change Addition Addition 7171 F Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF

13. I hereby certify that the information supplied with this filing 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2000

Daytime Phone #