

SECURITIES AND EXCHANGE COMMISSION

FORM 3

Filing Date: **2009-01-26** | Period of Report: **2009-01-16**
SEC Accession No. **0001357550-09-000003**

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ISSUER

BBV Vietnam S.E.A. Acquisition Corp.

CIK: **1415586** | IRS No.: **383763315** | State of Incorporation: **1T** | Fiscal Year End: **1231**
SIC: **6770** Blank checks

Mailing Address

*61 HUE LANE
HAI BA TRUNG DISTRICT
HANOI Q1 10000*

Business Address

*61 HUE LANE
HAI BA TRUNG DISTRICT
HANOI Q1 10000
84-09-1332-3538*

REPORTING OWNER

WEISS CAPITAL LLC

CIK: **1357550** | State of Incorporation: **DE** | Fiscal Year End: **1231**
Type: **3** | Act: **34** | File No.: **000-53083** | Film No.: **09544948**

Mailing Address

*29 COMMONWEALTH AVE.
BOSTON MA 02116*

Business Address

*29 COMMONWEALTH AVE.
BOSTON MA 02116
617-778-7780*

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0104
Expires:	02/28/2011
Estimated average burden hours per response	0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person WEISS CAPITAL LLC (Last) (First) (Middle) 29 COMMONWEALTH AVE. (Street) BOSTON, MA 02116 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 01/16/2009	3. Issuer Name and Ticker or Trading Symbol BBV Vietnam S.E.A. Acquisition Corp. [BBVVF]		
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) _____ Director <input checked="" type="checkbox"/> 10% Owner _____ Officer (give title below) _____ Other (specify below)		5. If Amendment, Date Original Filed (Month/Day/Year)
		6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person _____ Form Filed by More than One Reporting Person		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	727,699 ⁽¹⁾	I	See Footnote 1

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Warrants	⁽²⁾	02/08/2012 ⁽²⁾	Common Stock	381,900 ⁽³⁾	\$5	I	See Footnote 3

Explanation of Responses:

- Shares reported herein represent shares beneficially owned by a private investment partnership of which Weiss Capital LLC is the Investment Manager and by a private investment corporation of which Weiss Capital LLC is the Investment Manager. Weiss Capital LLC disclaims beneficial ownership of the shares reported herein except to the extent of its pecuniary interest therein.
- There is currently no exercise date for the warrants, which only become exercisable after the completion of a business combination, and will expire on February 8, 2012, or earlier upon redemption.
- Warrants reported herein represent warrants beneficially owned by a private investment partnership of which Weiss Capital LLC is the Investment Manager and by a private investment corporation of which Weiss Capital LLC is the Investment Manager. Weiss Capital LLC disclaims beneficial ownership of the shares reported herein except to the extent of its pecuniary interest therein.

Signatures

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.