2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
May 11, 2005
Secretary of State

DOCUMENT# P01000017389

Entity Name: KHUNCHORN, INC.

Current Principal Place of Business:

2796 KIMBERLEE LANE
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

2796 KIMBERLEE LANE
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-3724736 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUAMAN, ROGER
312 WHITNEY STREET
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

HUAMAN, ROGER
2646 SAMPLE ST
KISSIMMEE, FL 34744 US

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: ROGER HUAMAN 05/11/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GOSUWIN, NOYA
Address: 2796 KIMBERLEE LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: D (X) Delete
Name: GOSUWIN, OTIS
Address: 2796 KIMBERLEE LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: D (X) Delete
Name: GOSUWIN, SITTAPORN
Address: 2796 KIMBERLEE LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete
Name: OPAPANT, POLWIT
Address: 2796 KIMBERLEE LANE
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KHUNCHORN, NOYA
Address: 2796 KIMBERLEE LANE
City-St-Zip: KISSIMMEE, FL 34744

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NOYA KHUNCHORN D 05/11/2005
Electronic Signature of Signing Officer or Director Date