

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 21, 2005 8:00 am**  
**Secretary of State**

03-21-2005 90099 045 \*\*\*\*61.25

**DOCUMENT # N02000003511**

1. Entity Name

MAHADHATUJETIYARAM TEMPLE INC.



Principal Place of Business

4691 ROYAL PALM BEACH BLVD.  
WEST PALM BEACH FL 33411

Mailing Address

4691 ROYAL PALM BEACH BLVD.  
WEST PALM BEACH FL 33411

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

21-0014581

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THUAPRAKHON, V. THOONTHAWAI  
71 TORTUGA ROAD  
PALM SPRINGS FL 33461

Name THUAPRAKHON, V. THOONTHAWAI

Street Address (P.O. Box Number is Not Acceptable)

4691 ROYAL PALM BEACH BLVD.

WEST PALM BEACH

City

FL

Zip Code 33411

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

*P. Thuaprakhon*

March 15, 05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME THUAPRAKHON, V. THOONTHAWAI  
STREET ADDRESS 71 TORTUGA ROAD  
CITY-ST-ZIP PALM SPRINGS FL 33461

TITLE D ☐ Delete  
NAME WISNEFSKI, JOHN  
STREET ADDRESS 1336 THRON RIDGE LANE  
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE D ☐ Delete  
NAME SROIVATTANA, SUNDAREE  
STREET ADDRESS 2925 EMBASSY DRIVE  
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE D ☒ Delete  
NAME TIPFUN, SARAH  
STREET ADDRESS 1140 N W 22ND AVENUE  
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE ☐ Delete  
NAME SUMONTHEE, PRAJUAB  
STREET ADDRESS 414 KERN ST.  
CITY-ST-ZIP WEST PALM BEACH FL 33405

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition  
NAME WANDEE NGUYEN  
STREET ADDRESS 10136 CALUMET LANE  
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 617, 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:

*P. Thuaprakhon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 15, 05 (561) 790-9218

Date

Daytime Phone #