## I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

#### SIGNATURE: APIPOL INTHARAKSA

Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **Current Principal Place of Business:**

888 BISCAYNE BOULEVARD SUITE 200 MIAMI, FL 33132

## **Current Mailing Address:**

DOCUMENT# N0600007447

C/O CASTLE MANAGEMENT PO BOX 559009 FORT LAUDERDALE, FL 33355

## FEI Number: 20-8586676

## Name and Address of Current Registered Agent:

GARY MARS ESQ. 201 ALHAMBRA CIRCLE, 11TH FLOOR CORAL GABLES, FL 33134 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	E: APIPOL INTHARAKSA			04/10/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	TREASURER	
Name	INTHARAKSA, APIPOL	Name	CHU, BOWIE	
Address	888 BISCAYNE BLVD	Address	888 BISCAYNE BLVD	
City-State-Zip:	MIAMI FL 33132	City-State-Zip:	MIAMI FL 33132	
Title	SECRETARY			
Name	JAIN, AVRA			
Address	888 BISCAYNE BLVD			
City-State-Zip:	MIAMI FL 33132			

Certificate of Status Desired: No

04/10/2024

# FILED Apr 10, 2024 Secretary of State 1790553283CC

Date