

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000012394

**Entity Name:** WAT THAMMADEVARAJ, INC.

**Current Principal Place of Business:**

9200 CRYSTAL SPRINGS RD  
JACKSONVILLE, FL 32221

**Current Mailing Address:**

9200 CRYSTAL SPRINGS RD  
JACKSONVILLE, FL 32221 US

**FEI Number:** 36-4910287

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

THAMBUNDIT, PORNAMPA  
2930 BAYSHORE VISTA DR  
TAMPA, FL 33611 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:** PORNAMPA THAMBUNDIT

01/31/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name PHOLSRI, DAMRONG  
Address 9200 CRYSTAL SPRINGS RD  
City-State-Zip: JACKSONVILLE FL 32221

Title VP  
Name THAMBUNDIT, AMNUAY  
Address 2930 BAYSHORE VISTA DR  
City-State-Zip: TAMPA FL 33611

Title SECRETARY, TREASURER  
Name THAMBUNDIT, PORNAMPA  
Address 9200 CRYSTAL SPRINGS RD  
City-State-Zip: JACKSONVILLE FL 32221

Title AUTHORIZED REPRESENTATIVE  
Name SRIBUNGNGAW, DENCHAI  
Address 9200 CRYSTAL SPRINGS RD  
City-State-Zip: JACKSONVILLE FL 32221

*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.*

**SIGNATURE:** PORNAMPA THAMBUNDIT

**SECRETARY**

01/31/2023

Electronic Signature of Signing Officer/Director Detail

Date