DOCUMENT# N9300000261

Entity Name: WAT FLORIDA DHAMMARAM, INC.

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

2421 OLD VINELAND ROAD KISSIMMEE, FL 34746

## **Current Mailing Address:**

2421 OLD VINELAND ROAD KISSIMMEE, FL 34746

## FEI Number: 59-3165299

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

CHANTARA, YOUTH 2813 S. HIAWASSEE RD. 304 ORLANDO, FL 32835 US Certificate of Status Desired: No

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: YOUTH CHANTARA				01/25/2024		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	С	Title	PRESIDENT, DIRECTOR			
Name	KRUAKAEW, PHRA S	Name	DEEYING, PRAYONG			
Address	2421 OLD VINELAND RD	Address	279 SAGE CREST DR			
City-State-Zip:	KISSIMMEE FL 34747	City-State-Zip:	OCOEE FL 34761			
Title	VP, DIRECTOR	Title	TREASURER, DIRECTOR			
Name	GILLETT, KAM	Name	SAECHIM, KESORN			
Address	961 STARLING DRIVE	Address	2684 BLACK OAK LANE			
City-State-Zip:	WINTER GARDEN FL 34787	City-State-Zip:	KISSIMMEE FL 34747			
Title	SECRETARY, DIRECTOR	Title	DIRECTOR			
Name	VEJMANEESRI, CHAVALIT	Name	KRAMER, SUCHAYA			
Address	515 PORTLAND CIR.	Address	1651 S BETTY LN			
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	CLEARWATER FL 33756			
Title	DIRECTOR	Title	DIRECTOR			
Name	ARTYAMSOAL, VINAI DR.	Name	CORTEZ, WIRAT			
Address	708 IXORA AVE	Address	1020 NEVILLE LN			
City-State-Zip:	ELLENTON FL 34222	City-State-Zip:	ORLANDO FL 32818			
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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: PRAYONG DEEYING

PRESIDENT

01/25/2024

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Jan 25, 2024 Secretary of State 0358612669CC

#### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	OKOPSKI, SUPARNEE JENNY	Name	PRYOR, UMPAI K.
Address	2421 OLD VINELAND ROAD	Address	2421 OLD VINELAND ROAD
City-State-Zip:	KISSIMMEE FL 34746	City-State-Zip:	KISSIMMEE FL 34746
Title	DIRECTOR	Title	DIRECTOR
Name	TAOKEAW, KOMKRIT	Name	CAMPBELL, CHALERMSRI V
Address	2421 OLD VINELAND ROAD	Address	2421 OLD VINELAND ROAD
City-State-Zip:	KISSIMMEE FL 34746	City-State-Zip:	KISSIMMEE FL 34746
Title	DIRECTOR	Title	DIRECTOR
Name	PORNMUKDA, MANOCH	Name	CURREN, SUPIS
Address	2421 OLD VINELAND ROAD	Address	2421 OLD VINELAND ROAD
City-State-Zip:	KISSIMMEE FL 34746	City-State-Zip:	KISSIMMEE FL 34746