

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F43695

Entity Name: SIAM COUSIN CORPORATION

FILED
Apr 14, 2006
Secretary of State

Current Principal Place of Business:

2010 WILTON DR.
WILTON MANORS, FL 33305

New Principal Place of Business:

Current Mailing Address:

2010 WILTON DR.
WILTON MANORS, FL 33305

New Mailing Address:

FEI Number: 59-2339946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAMKUNEE, PRAPHA
6001 NE 14 ROAD
FORT LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: NAMKUNEE, SURIN,
Address: 6001 NE 14TH RD.
City-St-Zip: FT. LAUDERDALE, FL

Title: PS () Delete
Name: NAMKUNEE, PRAPHA,
Address: 6001 NE 14TH RD.
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NAMKUNEE, SURIN,
Address: 6001 NE 14TH RD.
City-St-Zip: FT. LAUDERDALE, FL

Title: S (X) Change () Addition
Name: NAMKUNEE, PRAPHA,
Address: 6001 NE 14TH RD.
City-St-Zip: FT. LAUDERDALE, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SURIN NAMKUNEE

P

04/14/2006

Electronic Signature of Signing Officer or Director

Date