

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F81340

Entity Name: SENIEX CORPORATION

FILED  
Jan 07, 2004  
Secretary of State

## Current Principal Place of Business:

% NISAKORN P. LORESKI  
4141 S. TAMiami TRL., #10  
SARASOTA, FL 342310636

## Current Mailing Address:

% NISAKORN P. LORESKI  
4141 S. TAMiami TRL #10  
SARASOTA, FL 342310636 US

## New Principal Place of Business:

% NISAKORN LORESKI  
4141 S. TAMiami TRL., #10  
SARASOTA, FL 342310636

## New Mailing Address:

% NISAKORN LORESKI  
4141 S. TAMiami TRL #10  
SARASOTA, FL 342310636 US

FEI Number: 59-2194930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SUPAKIT VIJITCHANTON  
4780 CAMPHOR AVE.  
SARASOTA, FL 34231 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: P ( ) Delete  
Name: LORESKI, NISAKORN P.,  
Address: 4141 S TAMiami TRL #10  
City-St-Zip: SARASOTA, FL

Title: VT ( ) Delete  
Name: VIJITCHANTON, SUPAKI, T  
Address: 4780 CAMPHOR AVENUE  
City-St-Zip: SARASOTA, FL

Title: VS ( ) Delete  
Name: VIJITCHANTON, MALAI,  
Address: 4780 CAMPHOR AVENUE  
City-St-Zip: SARASOTA, FL

Title: V (X) Delete  
Name: LORESKI, GERALD D  
Address: 4141 S TAMiami TRL  
City-St-Zip: SARASOTA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LORESKI, NISAKORN,  
Address: 4141 S TAMiami TRL #10  
City-St-Zip: SARASOTA, FL 34231

Title: VT (X) Change ( ) Addition  
Name: VIJITCHANTON, SUPAKI, T  
Address: 4780 CAMPHOR AVENUE  
City-St-Zip: SARASOTA, FL 34231

Title: VS (X) Change ( ) Addition  
Name: VIJITCHANTON, MALAI,  
Address: 4780 CAMPHOR AVENUE  
City-St-Zip: SARASOTA, FL 34231

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NISAKORN LORESKI

P

01/07/2004

Electronic Signature of Signing Officer or Director

Date