

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086039

FILED  
Apr 29, 2012  
Secretary of State

Entity Name: THAI-BY-THAI ENTERPRISES, LLC

**Current Principal Place of Business:**

124 PALM COAST PARKWAY, NE  
PALM COAST, FL 32137 US

**New Principal Place of Business:**

**Current Mailing Address:**

124 PALM COAST PARKWAY, NE  
PALM COAST, FL 32137 US

**New Mailing Address:**

FEI Number: 20-2176164

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BANCHANURAT, SUPATTRA  
124 PALM COAST PARKWAY, NE  
PALM COAST, FL 32137 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

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: BANCHANURAT, SOMPONG  
Address: 124 PALM COAST PARKWAY NE  
City-St-Zip: PALM COAST, FL 32137

Title: D  
Name: BANCHANURAT, SOMPONG  
Address: 124 PALM COAST PARKWAY NE  
City-St-Zip: PALM COAST, FL 32137

Title: V  
Name: BANCHANURAT, SUPATTRA  
Address: 124 PALM COAST PARKWAY NE  
City-St-Zip: PALM COAST, FL 32137

Title: S  
Name: BANCHANURAT, SUPATTRA  
Address: 124 PALM COAST PARKWAY NE  
City-St-Zip: PALM COAST, FL 32137

Title: T  
Name: BANCHANURAT, SUPATTRA  
Address: 124 PALM COAST PARKWAY NE  
City-St-Zip: PALM COAST, FL 32137

Title: D  
Name: BANCHANURAT, SUPATTRA  
Address: 124 PALM COAST PARKWAY NE  
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SUPATTRA BANCHANURAT

SUPA

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date