

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000101153

FILED
Apr 14, 2009
Secretary of State**Entity Name:** LEMON GRASS OF BOYNTON BEACH, LLC**Current Principal Place of Business:**1800 N. CONGRESS AVENUE,
SUITE #106
BOYNTON BEACH, FL 33426**New Principal Place of Business:****Current Mailing Address:**1800 N. CONGRESS AVENUE,
SUITE #106
BOYNTON BEACH, FL 33426**New Mailing Address:****FEI Number:** 26-0581049**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PIYAVICHAYANONT, NIWAT
2016 ALTA MEADOWS LANE
APT 702
DELRAY BEACH, FL 33444 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:** MGRM () Delete
Name: CHATCHONBUTR, WANIDA
Address: 2018 ALTA MEADOWS LANE APT 410
City-St-Zip: DELRAY BEACH, FL 33444**Title:** MGRM () Delete
Name: PIYAVICHAYANONT, NIWAT
Address: 2016 ALTA MEADOWS LANE APT 702
City-St-Zip: DELRAY BEACH, FL 33444**Title:** S1 () Delete
Name: RAGHAVAN, SUNTREYA
Address: 3723 WOODFIELD DR.
City-St-Zip: COCONUT CREEK, FL 33073**Title:** S2 () Delete
Name: TOWEERASOOTH, ARNONT
Address: PO BOX 4980
City-St-Zip: FORT LAUDERDALE, FL 33338**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGMR () Change (X) Addition
Name: GRAYSON, KHWANRIDEE P
Address: 1231 S.W. 1ST AVE B
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: KHWANRIDEE P GRAYSON

MGRM

04/14/2009

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