

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000048012

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** RATCHADA THAI RESTAURANT LLC

**Current Principal Place of Business:**

270 1ST AVE N  
ST PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

270 1ST AVE N  
ST PETERSBURG, FL 33701 US

**New Mailing Address:**

**FEI Number:** 26-0141018

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAHAPIROM, SUPHAT  
4701 88TH AVE NORTH  
APT #1103  
PINELLAS PARK, FL 33782 US

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

MAHAPIROM, PATRICK V  
9485 50TH WAY N  
PINELLAS PARK, FL 33782 US

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:** PATRICK MAHAPIROM

04/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MAHAPIROM, PATRICK V  
**Address:** 9485 50TH WAY N  
**City-St-Zip:** PINELLAS PARK, FL 33782 US

**Title:** MGRM  
**Name:** MAHAPIROM, SINGRAN  
**Address:** 1601 35TH ST N  
**City-St-Zip:** ST PETERSBURG, FL 33713 US

**Title:** MGRM  
**Name:** MAHAPIROM, SINGHA  
**Address:** 9485 50TH WAY N  
**City-St-Zip:** PINELLAS PARK, FL 33782

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:** PATRICK MAHAPIROM

MGR

04/26/2012

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