**PROFIT CORPORATION** ANNUAL REPORT

1997

THAI HOUSE, INC.

**SIGNATURE** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L32707

(6)

## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

## **FILED** Jan 28 1997 8:00am Secretary of State

Maker of Andress (Andress )  Maker of Andress								
1255 WASHWICH AVE   125 WASHWICH AVE   11/27/1988   3. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   125 Carl Report   11/27/1988   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   3s. Date of Last Report   11/27/1988   3s. Date incorporated or Qualified   1s. Date of Last Report   1s. Date	Principal Plac	e of Business	Mailing Address	Mailing Address		I FARINAIN OOR TIIND FADIT POOTE BUHAN HOOL BERGA BURAN ONDIN DARKE EHEN TOUT		
2. Principal Place of Business   2a. Mailing Address   3. FEI Number   Applied For   Applied For   21   22   22   23   3. Complete   25   25   25   25   25   25   25   2	MAIKO JAPANESE RESTAURANT 1255 WASHINGTON AVE MIAMI BCH FL 33139		MAIKO JAPANESE RESTAURANT 1255 WASHINGTON AVE MIAMI BCH FL 33139-4613					
Suite, Apt #, etc								eport
City & State:  RUSSMETES, KHRJAWAN  S. MARKO JAPANESE RESTAURANT  1255 WASHINGTON AVE  MIAMI BCH FL 33139  B3  B4 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0002 and 607 1508, Florida Statuties, the above-named corporation is submits this statement for the purpose of changing its registered algorit and mineral way. And except the deligation of State on Provisions of Sections 607 605, Florida Statuties, the above-named corporation is board of directors. I hereby accept the exponiment as registered algorit and mineral way. And except the deligation of Sections 607 605, Florida Statuties  SIGNATURE  12.		lace of Business	<del></del>				<del></del>	
20   Country   Zrp	<b>—</b>	#, etc	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired	•	
Zep   Country   Zep   Southly   Zep   Southly   Set   This corporation has liability for intengible tax under s. 199.032, Portice Statutes   Por	— ·	e	├- <b>-</b> ¬			· · · · · ·		
25   29   30   Policid Statutes   6 to No		Country		Country				
RUSSMETES, KHRUAWAN  % MAINO JAPANESE RESTAURANT 1255 WASHINGTON AVE MIAMI BCH FL 33139  81 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0509, Florida Statutes, the above named corporation automite this statement for the purpose of changing lis register office or registered agont, or both in the State of Florida. Such change was authorized by the corporation submite this statement for the purpose of changing lis register office or registered agont. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. MAIN PROVIDERS OF THE PROPOSED AND DIRECTORS OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. SIRER ADDRESS  CITY-ST-2P  14. OTHER ST  NAME  12. OFFICERS AND DIRECTORS IN 12  13. SIRER ADDRESS  CITY-ST-2P  14. OTH-ST-2P  14. OTH-ST-2P  14. OTH-ST-2P  15. N. MAMI BEACH FL  14. OTH-ST-2P  15. N. MAMI BEACH FL  15. TITLE	24			30				, , , , , , , , , , , , , , , , , , , ,
*** MAKO JAPANESE RESTAURANT 1255 WASHINGTON AVE MAMI BCH FL 33139  *** MICRO JAPANESE RESTAURANT 1255 WASHINGTON AVE MAMI BCH FL 33139  *** City Japanese of Sections 607 0505 and 607 1506. Florida Statistics, the above-named corporation automits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent with and accept the obligations of Section 607 0505, Florida Statules.  **SIGNATURE**  **SIGNATURE**  **DOFFICERS AND DIRECTORS OF THE PROPAGE AGENT AGEN	<b>5</b> 114		it Registered Agent		N	10. Name and Address of New Registe	red Agent	
1255 WASHINGTON AVE MIAMI BCH FL 33139  13				81	Name			
### BBH FL 33139  ### City				82	Street	Address (P.O. Box Number is Not Acceptable)		
Section 607.0502 and 607.1508. Florida. Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of Section 607.0502. Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of Section 607.0505. Florida Statutes of State of Professional State of Section 607.0505. Florida Statutes of State of Professional State of State of State of State of Professional State of State of Professional State of Sta				63				
11. Pursuant to the provisions of Socions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, and accept the obligations of, Section 607.6505, Florida Statutes, the appointment as registered agent, and accept the obligations of, Section 607.6505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. This is the statement for the purpose of changing lis registered by the corporation's board of directors. I hereby accept the appointment as registered signature required when reinfalling)  DATE  12. OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. IN 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIREC	3714 W	50:1: 5 00:00						
office or registered agent, or both, in the State of Horiza Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607 5505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  CITY-ST-ZIP  TITLE  RUSSMETES, KHRUAWAN  250 NE 163RD ST.  N. MIAMI BEACH FL  14 OTY-ST-ZIP  TITLE  MANORAT, WITTAYA  22 NIME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MANORAT, WITTAYA  22 SI REET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  13 TITLE  DELETE  21 TITLE  DELETE  DELETE  31 STREET ADDRESS  ACTIY-ST-ZIP  Change  Addit  Addit  ACTIY-ST-ZIP  Change  Addit  Addit  ACTIY-ST-ZIP  Change  Addit  Addit  ACTIY-ST-ZIP  Change  Change  Addit  ACTIY-ST-ZIP  Change  Change  Addit  ACTIY-ST-ZIP  Change  Addit  ACTIY-ST-ZIP  Change  Addit  ACTIY-ST-ZIP  Change  Change  Addit  ACTIY-ST-ZIP  ACTIY-ST-ZIP  ACTIV-ST-ZIP  ACTI				84	City		FL 85 Zip C	Code
agent. I am laminar with, and accept the obligations of. Section 607 0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  TITLE  NAME  RUSSMETES, KHRUAWAN  12 NAME  STREF ADDRESS  CITY-ST-2PP  NAMORAT, WITTAYA  225 NE 183RD ST.  N. MIAMI BEACH FL  DELETE  DELETE  DELETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. OTH ST-2PP  Change  Addit  Addit  Addit  STREF ADDRESS  CITY-ST-2PP  NAME  MANORAT, WITTAYA  22 NAME  MANORAT, WITTAYA  22 NAME  MANORAT, WITTAYA  23 SIRRET ADDRESS  CITY-ST-2PP  N. MIAMI BEACH FL  DELETE  31 TITLE  DELETE  33 SIRRET ADDRESS  34 CITY-ST-2PP  N. MIAMI BEACH FL  DELETE  33 SIRRET ADDRESS  34 CITY-ST-2PP  Change  Addit  Change  Addit  Addit  Change  Addit  Addit  Change  Addit  Addit  Change  Addit  A	11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the above	-named	corporation submits this statement for the purpor	se of changing its	s registered
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Fi	iorida Statutes	tile cor i.	poration's board of directors. Thereby accept the	appointment as	registered
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MANDEACH FL ST MANORAT, WITTAYA 2250 NE 163RD ST. N. MIAMI BEACH FL ST MANORAT, WITTAYA 2250 NE 163RD ST. N. MIAMI BEACH FL ST MANORAT, WITTAYA 2250 NE 163RD ST. N. MIAMI BEACH FL ST STREET ADDRESS N. MIAMI BEACH FL ST STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS STREET ADDRESS TITLE MAME STREET ADDRESS TOP:-ST-ZIP TITLE MAME STREET ADDRESS TOP:-ST-ZIP TITLE MAME STREET ADDRESS AS STREET ADDRESS	SIGNATURE							
TITLE	48				nt signature	······································		
NAME   STREET ADDRESS   2250 NE 163RD ST.   N. MIAMI BEACH FL   DELETE   TITLE   ST   DELETE   DELETE   STREET ADDRESS   CITY-ST-2IP   DELETE   D		P OFFICERS AN				ADDITIONS/CHANGES TO OFFICERS	······································	
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DELETE   D		N. MIAMI BEACH FL						_
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DELETE	STREET ADDRESS			2 3 STREET	address	2250 NE 163 RD ST		
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STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP   1255 WASHINGTON AVE.   34 CITY-ST-ZIP   MRMI DEACH, FL 33/39   Change   Address   1255 WASHINGTON AVE.	TITLE	•	☐ DELETE	31 TITLE		DVP	Change	Addition
DELETE   34.CITY-ST-ZIP   MIRM! DEACH, FL 33/39     DELETE   11   TITLE				32 NAME				
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NAME			DELETE		T- ZIP		Change	Addition
13 STREET ADDRESS   12 55 WAS HING TON AVE   14 CITY-ST-ZIP   MIAMI BEACH, FL 33/39   Change   AddRid   AddRi			Lad District	•		l <u> </u>	C CHANGE	M vanition
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TITLE	STREET ADDRESS			5.3 STREET	address			
NAME 6.2 NAME	CITY-ST-ZIP			5.4 CITY - S	- ZIP			
	TITLE		DELETE	6.1 TITLE			☐ Change	Addition
STARFLY ADDRESS	NAME			6.2 NAME				
U.S. SHILLY PROVIDERS	STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-SI-ZIP  6.4 CITY-SI-ZIP  6.4 CITY-SI-ZIP		ou portification information of	of colling about difficult of the second of the			110 00000000000000000000000000000000000		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the lam an officer or director of the corporation or the receiver or trustee emperored to execute this report as influence by Chapter 607, Florida Statutes; and that my name appears in Block 17 or Block 13 it changed, or on an authorized that it is a different to the corporation of the corporation o	informatio Lam an of	n indicated on this annual report or s flicer or director of the corporation or	supplemental annual report is to the receiver or trustee emean	true and accu	nption s rate and ute this i	itated in Section 119.07(3)(1), Florida Statutes. I full that my signature shall have the same legal efference as required by Chapter 607, Florida Statute	inner certify that to ct as if made und is; and that my n	tne der oath; that lame

TED NAME OF SIGNING OFFICER OR DIRECTOR