

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L74097

FILED
Feb 01, 2010
Secretary of State

Entity Name: EL ESCORIAL RESTAURANT CORP.

Current Principal Place of Business:

8745 SUNSET DR.
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

8745 SUNSET DR.
MIAMI, FL 33173

New Mailing Address:

FEI Number: 65-0192488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THERATHANAKORN, WICHAI
1033 CEDAR FALL DRIVE
FT. LAUDERDALE, FL 33327 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
Name: CHOMPOONICH, EDDY
Address: 11803 NW 13 ST
City-St-Zip: PEMBROKE PINES, FL 33026

Title: O
Name: THERATHANAKORN, WICHAI
Address: 1033 CEDAR FALLS DR
City-St-Zip: WESTON, FL 33327

Title: O
Name: WAI KEUNG, KWOK
Address: 1033 CEDAR FALLS DRIVE
City-St-Zip: WESTON, FL 33327

Title: O
Name: MASINTAPAN, NITTAYA
Address: 8745 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: O
Name: UNG-VICHIAN, VICHIAN
Address: 6495 PONDAPPLE DR
City-St-Zip: BOCA RATON, FL 33433

Title: O
Name: BOONNAUG, KALOF
Address: 8745 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

I hereby 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 all other like empowered.

SIGNATURE: WICHAI THERATHANAKORN

O

02/01/2010

Electronic Signature of Signing Officer or Director

Date