2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # N02000003511

1. Entity Name
MAHADHATUJETIYARAM TEMPLE INC.

Principal Place of Business	Mailing Address
71 TORTUGA ROAD PALM SPRINGS, FL 33461	71 TORTUGA ROAD PALM SPRINGS, FL 33461

04072004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
21-0014581
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

THUAPRAKHON, V. THOONTHAWAI
71 TORTUGA ROAD
PALM SPRINGS, FL 33461

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000119115
04/19/04-80087-023 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	THUAPRAKHON, V. THOONTHAWAI
STREET ADDRESS	71 TORTUGA ROAD
CITY-ST-ZIP	PALM SPRINGS, FL 33461
TITLE	D
NAME	WISNEFSKI, JOHN
STREET ADDRESS	1336 THRON RIDGE LANE
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411
TITLE	D
NAME	SROIVATTANA, SUNDAREE
STREET ADDRESS	2925 EMBASSY DRIVE
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	D
NAME	TIPFUN, SARAH
STREET ADDRESS	1140 N W 22ND AVENUE
CITY-ST-ZIP	DELRAY BEACH, FL 33445
TITLE	T
NAME	SUMONTHEE, PRAJUAB
STREET ADDRESS	414 KERN ST.
CITY-ST-ZIP	WEST PALM BEACH, FL 33405
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I 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 report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: V. Thuaprakhon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #