2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007329

FILED Mar 20, 2009 Secretary of State

Entity Name: FLORIDA MEDITATION CENTER, INC.

Current Principal Place of Business:			Nev	New Principal Place of Business:		
	PRDON ST., Y, FL 33563					
Current Mailing Address:			Nev	New Mailing Address:		
	RDON ST., Y, FL 33563					
FEI Number:	65-1284133	FEI Number Applied For()	FEI Number	Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Nar	ne and Address	of New Registered Agent:	
SUPIN, KIEWSUNTIA 1303 N. GORDON ST., PLANT CITY, FL 33563 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:						
Electronic Signature of Registered Agent					Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	. ,		Title Nam Addr City-	e:	() Change () Addition	
Title: Name: Address: City-St-Zip:			Title Nam Addr City-	e:	() Change () Addition	
Title: Name: Address: City-St-Zip:	•			e: ess: St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:			Title Nam Addr City-	e:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () FAN, SHU CHIH 801 E. FOOTHII AZUSA, CA 917	LL BLVD.	Title Nam Addr City-	e:	() Change () Addition	

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHARMAHA C CHAICHANA O 03/20/2009