


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90837 050 ****70.00

DOCUMENT # N06000012029	
1. Entity Name WAT FLORIDA BUDDHARAM CORP.	

Principal Place of Business 2137 FOX DEN DRIVE NAVARRE, FL 32566	Mailing Address 2137 FOX DEN DRIVE NAVARRE, FL 32566
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40093025



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04272007 Chg-NP CR2E037 (12/06)

4. FEI Number 711027491	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SUKHVSADI, VALLOBH 2137 FOX DEN DRIVE NAVARRE, FL 32566		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SUKHVSADI, VALLOBH 2137 FOX DEN DR NAVARRE, FL 32566 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD CHAIPRASERT, PHRAMAHA A 2137 FOX DEN DR NAVARRE, FL 32566 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD NETHONGKOME, AMNUAY 2137 FOX DEN DR NAVARRE, FL 32566 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOTTAVIO, DOKMAI ADVISOR 620 FAIRWAY AVE FORT WALTON BEACH, FL 32547 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARL, BILL 137 N AUDREY CR. NW FORT WALTON BEACH, FL 32548 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. Vallobh (Vallobh Sukhsvadi) 4/27/07 (850)939-9287

ATTACHMENT
40093025

Division of Corporations

Annual Report

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Document Number N06000012029
Business Entity Name WAT FLORIDA BUDDHARAM CORP.
FEI Number 711027491
FEI Number Status
Certificate of Status Desired Yes
Election Campaign Financing Trust Fund Contribution No

Principal Place of Business

Address 2137 FOX DEN DRIVE
Suite, Apt. #, etc.
City, State NAVARRE, FL
Zip Code & Country 32566

Mailing Address

Address 2137 FOX DEN DRIVE
Suite, Apt. #, etc.
City, State NAVARRE, FL
Zip Code & Country 32566

Name and Address of Registered Agent

Name (Last, First, Middle, Title) SUKHSVASDI, VALLOBH
Address 2137 FOX DEN DRIVE
Suite, Apt. #, etc.
City, State NAVARRE, FL
Zip Code & Country 32566 US
Registered Agent Signature

Officer/Director Name and Address

Title PD
Name (Last, First, Middle, Title) SUKHSVASDI, VALLOBH
Street Address 2137 FOX DEN DR
City, State NAVARRE, FL
Zip Code & Country 32566

Title VPSD
Name (Last, First, Middle, Title) CHAIPRASERT, PHRAMAHA , A
Street Address 2137 FOX DEN DR
City, State NAVARRE, FL
Zip Code & Country 32566

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N06000012029

Title ASD
Name (Last, First, Middle, Title) NETHONGKOME, AMNUAY
Street Address 2137 FOX DEN DR
City, State NAVARRE, FL
Zip Code & Country 32566

Title D
Name (Last, First, Middle, Title) DOTTAVIO, DOKMAI, ADVISOR
Street Address 620 FAIRWAY AVE
City, State FORT WALTON BEACH, FL
Zip Code & Country 32547

Title TD
Name (Last, First, Middle, Title) CARL, BILL
Street Address 137 N AUDREY CR. NW
City, State FORT WALTON BEACH, FL
Zip Code & Country 32548

Title PD
Officer/Director Signature VALLOBH SUKHSVASDI

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