


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 21, 2008 8:00 am
Secretary of State

05-21-2008 90023 046 ****61.25


DOCUMENT # N17157	
1. Entity Name	
THAI-AMERICAN ASSOCIATION OF SOUTH FLORIDA, INCORPORATED	

Principal Place of Business	Mailing Address
15200 SW 240TH ST MIAMI FL 33032	12112 LYMESTONE WAY COOPER CITY FL 33026

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

00024700



1st MOORE CR2E037 (10/07)

4. FEI Number	59-2808521	Applied For
		Not Applicable

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

6. Name and Address of Current Registered Agent
UNGVICHIAN, VICHATE DR. 6495 PONDAPPLE ROAD BOCA RATON FL 33433

7. Name and Address of New Registered Agent
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 _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) **DATE** _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	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	PD	TITLE	D
NAME	MOOLSIRI, KHANYA	NAME	Moolsiri, Khanya
STREET ADDRESS	12112 LYMESTONE WAY	STREET ADDRESS	12112 Lymestone Way
CITY- ST- ZIP	FORT LAUDERDALE FL	CITY- ST- ZIP	Cooper City, FL 33026
TITLE	VPD	TITLE	
NAME	TIRASITIPOL, BOON	NAME	
STREET ADDRESS	6450 SW 127TH AVE	STREET ADDRESS	
CITY- ST- ZIP	FORT LAUDERDALE FL 33330	CITY- ST- ZIP	
TITLE	SD	TITLE	PD
NAME	SAIDON, ROSIE	NAME	Ungvichian, Vichate Dr.
STREET ADDRESS	2791 SW 127TH AVE	STREET ADDRESS	6495 Ponapple Road
CITY- ST- ZIP	HOLLYWOOD FL 33027	CITY- ST- ZIP	Boca Raton, FL 33433
TITLE	TD	TITLE	
NAME	NEDTRANON, KULNADDA	NAME	
STREET ADDRESS	13740 SW 73RD AVE	STREET ADDRESS	
CITY- ST- ZIP	MIAMI FL 33158	CITY- ST- ZIP	
TITLE	D	TITLE	
NAME	WONGBUNDHIT, YAWADEE DR	NAME	
STREET ADDRESS	465 NE 113 STREET	STREET ADDRESS	
CITY- ST- ZIP	MIAMI FL 33161	CITY- ST- ZIP	
TITLE	D	TITLE	
NAME	PRAPASRI, PHADUNG PUND	NAME	
STREET ADDRESS	13146 SW 32ND STREET	STREET ADDRESS	
CITY- ST- ZIP	MIRAMAR FL 33027	CITY- ST- ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *[Signature]* **4/28/08 954 481-7984**