

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000002614

FILED
Oct 20, 2004
Secretary of State**Entity Name:** WATLAO BUDDHA PHAVANARAM INC.**Current Principal Place of Business:**5618 58TH ST N.
KENNETH CITY, FL 33709**New Principal Place of Business:****Current Mailing Address:**5618 58TH ST N.
KENNETH CITY, FL 33709**New Mailing Address:****FEI Number:** 59-3450687 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**VONGSALAY, KHOUTKEO
2327 47TH STREET NORTH
SAINT PETERSBURG, FL 33713 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**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: NAMMAKOTH, SOUTHAI
Address: 5618 58TH STREET N.
City-St-Zip: KENNETH CITY, FL 33709**Title:** PD () Delete
Name: VIXAYARATH, OUNHEUN
Address: 5188 -46TH AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33714**Title:** V () Delete
Name: KOMANY, ANDREW
Address: 2553 34TH AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713**Title:** T () Delete
Name: RAYO, BOUNYOU
Address: 4350 35TH TERRACE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713**Title:** S () Delete
Name: VONGSALAY, KHOUTKEO
Address: 2327 47TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713**Title:** D () Delete
Name: KETTAVONE, KHAMPHA
Address: 5618 58TH STREET N.
City-St-Zip: KENNETH CITY, FL 33709**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** PD (X) Change () Addition
Name: VIXAYARATH, OUNHEUN
Address: 5188 46TH AVE N.
City-St-Zip: SAINT PETERSBURG, FL 33714**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDREW KOMANY

V

10/20/2004

Electronic Signature of Signing Officer or Director_____
Date