

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 8:00 am
Secretary of State

07-12-2004 90013 037 ***150.00

DOCUMENT # P00000057970

1. Entity Name
PATTAYA ORCHID, INC.



Principal Place of Business
21755 SW 162ND AVENUE
MIAMI, FL 33170

Mailing Address
1000 QUAYSIDE TERRACE, #1608
MIAMI, FL 33138

44047811



2. Principal Place of Business

3. Mailing Address

21755 SW 162 Ave

07062004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Miami FL

4. FEI Number
65-0308716

Applied For
Not Applicable

Zip Country

Zip Country
33170

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TANTANA, ARAN
1000 QUAYSIDE TERRACE, #1608
MIAMI, FL 33138

Name
Tantana, ARAN
Street Address (P.O. Box Number is Not Acceptable)
21755 SW 162 Ave
City Miami FL Zip Code 33170

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 reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME TANTANA, ARAN ☐ Delete
STREET ADDRESS 1000 QUAYSIDE TERRACE, #1608
CITY-ST-ZIP MIAMI, FL 33138

TITLE D ☒ Change ☐ Addition
NAME Tantana, Aran
STREET ADDRESS 21755 S.W. 162 AVE.
CITY-ST-ZIP MIAMI, FL 33170

TITLE PD ☒ Delete
NAME ARAN, TANTANA
STREET ADDRESS 21755 SW 162ND AVENUE
CITY-ST-ZIP MIAMI, FL 33170

TITLE D ☐ Change ☒ Addition
NAME Pilla, Supranee
STREET ADDRESS 21755 SW 162 AVE
CITY-ST-ZIP MIAMI, FL 33170

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director 7-7-04, (305) 246-7768

Date

Daytime Phone #

M. TACHIBANA, C.P.A., P.A.

Attachment

MEMBER - AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS / FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

*#000000057970
44047811*

July 6, 2004

Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302

**RE: Pattaya Orchid, Inc.
Annual Report 2004**

Dear Sir/Madam

Enclosed, please find a check in the amount of \$150 as payment for the 2004 State of Florida Annual Report filing fee.

My client, Pattaya Orchid, Inc. did not receive the renewal notice from the State. They are now submitting their 2004 Annual Report filing upon our reminder to them.

We would greatly appreciate your kind understanding and cooperation in this matter.

Very Truly Yours,

M. Tachibana
M. Tachibana, C.P.A.

enc.