2005 FOR PROFIT CORPORATION

FILED Feb 14, 2005 08:00 AM

1. Entity Nar	IMENT # P00000102	2309		-4	Secretary of State	
3341 N FEI	ce of Business DERAL HWY PARK, FL 33306	Mailing Address 261 N.W. 16TH STREET POMPANO BEACH, FL 33060) (3.4 1) 8.5 () (1	1850 1677 1670 1800 1860 1860 1860 1860 1860 1860 1860 1860 1860 1860 1860 18	
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				02042005 No Chg-P CR2E034 (10/03) 4. FEI Number 65-1051711 Applied For 65-1051711 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required		
1770 NE 4	AT, TANITPORN 43 STREET D PARK, FL 33334			DO NOT WRITE IN THIS SPACE		
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, Registers	d Agent signature required	when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Campaign Final Trust Fund Contribution.		00 May Be ed to Fees	U00000230174 02/15/05-80033-003 150.00	
10. Titlé	OFFICERS AND	DIRECTORS				
NAME STREET ADDRESS CITY-ST-ZIP	VEERAWAT, TANITPORN 170 N.W. 97TH STREET MIAMI, FL. 33150				<u>.</u> ,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE 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 OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayling Priorie #						