2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Sep 16, 2003 8:00 am Secretary of State DOCUMENT# P01000025793 09-16-2003 90006 009 ***150.00 S:V.M. LOGISTIC, INC. Mailing Principal Place of 710 EXECUTIVE CENTER DRIVE 710-EXECUTIVE CENTER DRIVE **SUITE 11-12 SUITE 11-12** WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State 651093151 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Fee Required USA USA 7. Name and Address of Now Registered 6. Name and Address of Current Registered Name SAKKARAVIJ, BUNDIT 710 EXECUTIVE CENTER DRIVE, STE 11-12 Street Address (P 0 Box Number is Not Acceptable) WEST PALM BEACH FL 33401 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 may Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition TITLE TITLE SAKKARAVIJ, BUNDIT NAME 710 EXECUTIVE CENTER DRIVE, STE 11-12 STREET ADDRES STREET ADDRESS WEST PALM BEACH FL 33401 CITY - ST - ZIP Delete TITLE Chang Additi TITLE **BOONYOO, NIPON** NAME 1: 10 710 EXECUTIVE CENTER DRIVE, STE 11-12 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33401 CITY - STEZIP 1 CITY - ST - ZIP Delete 🔲 Chang 🔲 Additi TITLE BOONYOO, BUSSARA NAME NAME STREET ADDRESS 710 EXECUTIVE CENTER DRIVE, STE 11-12 STREET ADDRESS WEST PALM BEACH FL 33401 CITY - ST - ZIP CITY - ST - ZIP Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Delete Additi 🗌 Chang TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Delete Chang Additi TITLE NAME

13. 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 qualified by chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attaching the true and other like empowered.

STREET ADDRESS CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

AHachment# 80148656

September 10, 2003

FLORIDA DEPARTMENT OF STATE REINSTATEMENT DEPARTMENT DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE - FL - 32314

To Whom It May Concern:

- I would like to inform you that I have a Profit Corporation by the following name:

S.V.M. LOGISTIC, INC.

Doc. # P01000025793

And we have not receive the first notice of Annual Business Report 2003 and my accountant sent a letter to us mentioning that we are supposed to receive that and send back to Department of Florida - Division of Corporations with a \$ 150,00 annually.

Once we did not receive I'm sending the update Annual Business Form 2003 along with a check of \$ 150,00.

Thank you for your cooperation and concern, and if you have any question or concern regarding this matter, do not hesitate to contact us.

Sincerely,

BUNDIT SAKKARAVIJ President