2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUÍ 1. Entity Nam SRIVICHA				SECRET DIVISION O	FILED ARY OF STA F CORPORA 6 AH 10:	FIOHS							
Principal Place 4300 US 1 SUITE 205 JUPITER, FL													
2. Principal P													
Suite, Apt.	#, etc.	ite, Apt. #, etc.	, etc.			05072008	Chg-P	CR2E03	4 (12/06)				
City & State				City & State				4. FEI Numb 65-112			— —	plied For Applicable	
Zip		Country	Zir	· ·	Coun	try -		5. Certificate	of Status Desired		8.75 Add		
6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent Name						
YAP, ANNA-MARIA 4300 US 1 SUITE 205							Name VITTHAYA KHONGVAN Street Address (P.O. Box Number is Not Acceptable)						
SSLUFFS SQUARE JUPITER, FL 33477							AZOO C HC UTCHWAY 1 CHTTE 205						
POPILEX, I'L 33411						4300 S US HIGHWAY 1, SUITE 205 City JUPITER FL Zip Cydr 77							
8. The above named entity submits this statement for the purpose of changing its registered office or register									oth, in the State of				
the obligations of registered agent. VITTHAYA KHONGVAN													
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
Amended AR is \$61.25 9. Election Campaign Financing \$5. Trust Fund Contribution. Add													
10. OFFICERS AND DIRECTORS TITLE DP Delete						. 1	חח	ADDITIONS	CHANGES TO C		DIRECTORS	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	YAP, ANNA 4300 US 1 S JUPITER, F	SUITE 205	Delete		E ET ADDRÉSS	430	ONGVAN, VITTHAYA 00 US HIGHWAY 1, SUITE 205 PITER, FL 33477						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete					E Et address -st-zip					☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	AME PREET ADDRESS										. Change	. Addition	
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12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 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 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.													
SIGNAT	URE:Y	SIGNATURE AND TYPED	OR PRINTED N	AME OF SIGNING OFFICER		A KHOI	NGV	7N	5/12/08	(PA)	/IME Phone *	1443	