FOR PROFIT CORPORATION 2003 UNIFORM BUSINESS REPORT (UBR)

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TALLAHASSEE, FLORIDA

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4 Entity N	Jame (

SICHON DESIGN, INC.



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Phar Gally Cree		MUNICAL AND THE MARKET	- Aut			~ ~	
2. Principal Place of Business		3. Mailing Address		<u> </u>]		
8507 Dynasty Drive		8507 Dynast	8507 Dynasty Drive				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			RITE IN THIS SI	PACE A 3
				<u> </u>		676 V U	
City & State		City & State			65 1120205		Applied For
Boca Raton		Boca Raton		65-1130395		Not Applicable	
33433	Country USA	33433	Coun US		5. Certificate of Status Desired		8.75 Additional ee Required
K. 167 5					7. Name and Address of Current Registered Agent		
		/blace		Sichon	Domrongchai		
DO NOT WRITE.				Street Address (P.O. Box Number is Not Acceptable)			
IN THIS SPACE			Laste Mal	8507 Dynasty Drive			
			. 48a 1 63a	Boca Ra	ton	FL	3 ^{Zip Cod} 3
	named entity submits this statement ions of registered agent.	for the purpose of changing its	registere	ed office or register	ed agent, or both, in the State of (Aorida. I am far	miliar with, and accept
SIGNATURE .	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE	: Registere	d Agent signature required	when reinstating)	DATE	<u> </u>
	nuary 1 - May 1 Fee Is \$150.00 After May 1, Fee Is \$550.00 Amended UBR Is \$61.25 Payable to Florida Department o	of State			Election Campaign F Trust Fund Contribution	~ —	\$5.00 May Be Added to Fees
10.	OFFICERS AND	D DIRECTORS	1 1	CONTRACTOR.	PRINTS AND THE WAY THE	All the second of the second o	
TITLE	PD	- 1	TITLE				
NAME .	Domrongchai, S	ichon	24.77	ering by at		1 14 0	
STREET AODRESS	,		1, 9, 430	et address			
CITY-ST-ZIP	8507 Dynasty D Boca Raton, FL	33433	CITY	ST-ZIP	<u> Logaria di di kabatan ka</u>		
	***		-		TRANSPORT RESERVED TO THE REPORT OF THE REPO		

TITLE VSTD Domrongchai, Dana NAME NAME 8507 Dynasty Drive Boca Raton, FL 33433 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP TITLE TITLE NAME NAME : STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 emprehence to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other life emprehence.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

SICHON DESIGN, INC. 8507 DYNASTY DRIVE BOCA RATON, FL 33433

State of Florida Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

October 13, 2003

RE: UNIFORM BUSINESS REPORT

SICHON DESIGN, INC.

DOCUMENT # P01000078276

F.E.I.N. # 65-1130395____

Dear Sir/Madam:

Please be advised that we did not receive the pre printed/original Uniform Business Report Packet for 2003 for the above-mentioned corporation.

Enclosed please find a check in the amount of \$150.00 for the original fee with the signed report.

. Thank you for your cooperation in this matter.

Sincerely,

Sichon Domrongchai

President