


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90412 049 ***150.00

DOCUMENT # P02000108886 1. Entity Name SIAM INTER TRADING INC.	
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Principal Place of Business 830 S. MILITARY TRAIL WEST PALM BEACH, FL 33415	Mailing Address 1737 SAWGRASS CIR. GREEN ACRES, FL 33413
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04122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 48-1281428	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent NARIPHAPHAN, UDOMSIT 1737 SAWGRASS CIR. GREEN ACRES, FL 33413

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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 \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP NARIPHAPHAN, UDOMSIT 1737 SAWGRASS CIR. GREEN ACRES, FL 33413
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NARIPHAN, NATVEENA 1737 SAWGRASS CIR. GREEN ACRES, FL 33413
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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Udomsith Nariaphan **UDOMSIT NARIPHAPHAN**
PRESIDENT 4-22-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #