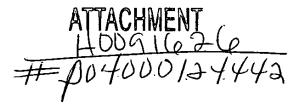
2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 12, 2006 8:00 am Secretary of State DOCUMENT # P04000124442 05-12-2006 90027 025 ***150.00 THE INTERNET QUICK GIFTS, CORP. Principal Place of Business Mailing Address 318 SW 32ND AVE. 318 SW 32ND AVE. DEERFIELD BCH, FL 33442 DEERFIELD BCH, FL 33442 2. Principal Place of Business 3. Mailing Address 3931 NW 2ND 3931 NW ZND Suite, Apt. #, etc. Suite, Apt. #, etc. 04192006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For DEER FIFLD BEACH 20-1560903 Not Applicable Country 3<u>3442</u> \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHATRATANAPHATCHAYA, SUDCHAI Street Address (P.O. Box Number is Not Acceptable) 318 SW 32ND AVE. DEERFIELD BCH, FL 33442 City Zip Code atement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits the obligations of registered age 4125/06 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE PTD ☐ Delete TITLE CHATRATANA PHATCHAYA, SUDCHAI CHATRATANAPHATCHAYA, SUDCHAI NAME NAME STREET ADDRESS 318 SW 32ND AVE. STREET ADDRESS 3931 NOV 2 NO CT DEERFIELD BEACH FL39442 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BCH, FL 33442 VSD TITLE ☐ Change ☐ Addition TITLE ☐ Delete VSD OUDOMHACK, KITTIVONG NAME NAME UUDOMHACK, KITTIVONE STREET ADDRESS STREET ADDRESS 318 SW 32ND AVE. 318 SW 32 NO AVE. DEERFIELD BEACH FL.33442 CITY+ST-7IP DEERFIELD BCH, FL 33442 CITY-ST-7IP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 truster impowered 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 appears, with all other like empowered.

FILED



5/10/2006

To Florida Department of State

I have been moving out to new house and mess-up my document. I just found it that you have sent it back to me on 4/24/06. I went to my accountant she told me to make a new check refill form moveing company address to new place then I forgot. If you could not do and I have to pay for fee \$550 please email chai9@bellsouth.net I will make a new check.

Thank you

The Internet Quick Gifts, Corp.

chai9@bellsouth.net