

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P05000037009

1. Entity Name
THAI HAUS INCORPORATION



FILED

06 AUG 25 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
125 NORTH CONGRESS AVENUE
BOYNTON BEACH, FL 33426

Mailing Address
125 NORTH CONGRESS AVENUE
BOYNTON BEACH, FL 33426

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07292006

Chg-P

CR2E034 (11/05)

4. FEI Number
20-2481078

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUKPROM, LAWAN
125 NORTH CONGRESS AVENUE
BOYNTON BEACH, FL 33426

Name SUPHASIT WANGSANG

Street Address (P.O. Box Number is Not Acceptable)

125 NORTH CONGRESS AVENUE

City BOYNTON BEACH

FL Zip Code 33426

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)

07/30/06

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME MUKPROM, LAWAN ☒ Delete
STREET ADDRESS 125 NORTH CONGRESS AVENUE
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE T
NAME MANISY, SIMMALY ☒ Delete
STREET ADDRESS 125 NORTH CONGRESS AVENUE
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE AS
NAME MUKPROM, SATHIANPHONG ☒ Delete
STREET ADDRESS 125 NORTH CONGRESS AVENUE
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE AT
NAME MUKPROM, PANATDA ☒ Delete
STREET ADDRESS 125 NORTH CONGRESS AVENUE
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PRESIDENT & TREASURER ☒ Change ☐ Addition
NAME SUPHASIT WANGSANG
STREET ADDRESS 125 N. CONGRESS AVE.
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE VICE PRESIDENT & SECRETARY ☒ Change ☐ Addition
NAME VACHIRANUT KRUESAN
STREET ADDRESS 125 N CONGRESS AVE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/30/06

Date

561-739-5180

Daytime Phone #