

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000044501

Entity Name: DAMRONG, INC.

FILED
Apr 17, 2008
Secretary of State

Current Principal Place of Business:

811 S. HOWARD AVENUE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

811 S HOWARD AVENUE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 59-3193376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAMRONGWATANASUK, TAPANE PRES
811 S HOWARD AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DAMRONGWATANASUK, TAPANE
Address: 811 S HOWARD AVENUE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: DAMRONGWATANASUK, NATCHAYA
Address: 811 S HOWARD AVENUE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: DAMRONGWATANASUK, NITCHANAN
Address: 811 S HOWARD AVENUE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: DAMRONGWATANASUK, TEERASAK
Address: 811 S HOWARD AVENUE
City-St-Zip: TAMPA, FL 33606

Title: T () Delete
Name: KNOWLES, RANDALL L
Address: 811 SOUTH HOWARD AVENUE
City-St-Zip: TAMPA, FL 33606

Title: S () Delete
Name: RATTHAPHONG, CHEDPHON
Address: 811 SOUTH HOWARD AVENUE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAPANE DAMRONGWATANASUK

PRES

04/17/2008

Electronic Signature of Signing Officer or Director

Date