2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2009
Secretary of State

DOCUMENT# P93000044501

Entity Name: DAMRONG, INC.

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 ( )**

Name and Address of Current Registered Agent:

DAMRONGWATANASUK, TAPANEE 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, TAPANEE	
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	(X) 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: TAPANEE DAMRONGWATANASUK PRES 02/10/2009

Electronic Signature of Signing Officer or Director — Date