## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

TITLE

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STREET ADDRESS CITY-ST-ZIP

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CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P94000050352 (1)

BAHN THAI RESTAURANT OF GAINESVILLE, INC.

MANEERATANA, SRISAMORN

1902 S. W. 13TH STREET

**GAINESVILLE FL 32608** 

Mailing Address Principal Place of Business 1902 S. W. 13TH STREET 1902 S. W. 13TH STREET GAINESVILLE FL 32608 GAINESVILLE FL 32808 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-3256339 26 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip Country Zip Yes Personal Property Tax due June 30. ☐ No 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MANEERATANA, SRISAMORN 1902 S. W. 13TH STREET Street Address (P.O. Box Number is Not Acceptable) 82 GAINESVILLE FL 32608 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1 1 TITLE TITLE MANEERATANA, NIPON 1.2 NAME NAME 1902 S. W. 13TH STREET 1.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32608 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE

2.2 NAME

3.1 TITLE

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4.1 TITLE

**4.2 NAME** 

5.1 TITLE

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6.1 TITLE

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2. 4 CITY - ST - ZIP

64 CITY-ST-7IP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental finual 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 distance empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, an address.

FILED

Feb 27 1998 8:00am

Secretary of State

Change

Change

Change

Addition

Addition

Addition

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