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

**PROFIT CORPORATION** ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** #

P95000042737 (3) OLD SIAM, CORP.

Principal Place of Business

Mailing Address

355 W. OAKLAND PARK BLVD

## **FILED** Feb 27 1998 8:00am Secretary of State



	RDALE FL 33311	FORT LAUDERDALE FL 331		DO NOT WRITE IN THIS	SPACE
		00		3. Date Incorporated or Qualified	OFACE
				05/26/1995	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
		26 Z700 NE	ial Ave	65-0595108	Not Applicable
Suite, Apt		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	610	6. Election Campaign Financing	<b>\$5.00</b> May Be
23 Ligh	Thouse Minit T. L.	20 Lighthouse	Country	Trust Fund Contribution	Added to Fees
24 330	9, Name and Address of Current R	29 33064 3	7 10 C	This corporation owes or has paid the cure Personal Property Tax due June 30. Name and Address of New Registered	Yes K-No
MA	ARTINEZ, LISA MARIA	ogistoreo Agent	81 Name	10, Name and Address of New Augistered	Manr
355 W OAKLAND PAYD RIVD				AIRED, USO MORA	
FORT LAUDERDALE FL 33311				dress (P.O. Box Number is Not Acceptable)	
83 28 20 13 21 13 23					
			84 City		les Zin Codo
			1 1120	nthouse fount-fl	85 Zip Code 4
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named proporation submits this statement for the purpose of changing its registered office or registered agent, or born, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. Fam familiar with, and first centitie obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE	* Hall Jail	Usa Maria I	Maltinez	President 2123	190
12,	Significant Fed or printed rates of Auguster diagnories OFFICERS AND D		Rogistered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	DELETE	1.	resident	Change    Addition
NAME	MARTINEZ, LISA MARIA				<b>4</b> · –
STREET ADDRESS	355 W. OAKLAND PARK BVD			isa Maria Martinez	
CITY-ST-ZIP	FORT LAUDERDALE F		1.4 CITY-ST-ZIP	poone alstique A	122011
TITLE		DELETE	2.1 TITLE	grandose resirro	☐ Change ☐ Addition
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STREET ADDRESS			23 STREET ADDRESS		
CITY-SI-ZIF			2. 4 CITY - ST - ZIP	3	
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NAME			3.2 NAME		
STREET ADDRESS	•		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
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NAME			5.2 NAME		•
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		∐ DELE1E	6.1 TITLE		☐ Change ☐ Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	postile that the information and the information	and the slope and a set of the	6.4 CITY-ST-ZIP	Casting 440 07(0)(8) F	- at - 1 - 2 at - 2 a
14. Thereby 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 suppliemental annual report is truly 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 needwer or trustee 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, or on an attachment with an addings.					

22/98 954-788-9279