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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000080396 (1)

BANGKOK HOUSE, INC.

Principal Place of Business

Franchisco (Franchisco)

97 JUN 20 AM 7: 42

SECRETARY OF STATE TALLAHASSEE FLORIDA



306 HIGHWAY A1A SATELLITE BEACH FL 32837		306 HIGHWAY A1A SATELLITE BEACH FL 32837-2301							
						3. Date incorporated or Qualified 10/16/1995	3a. Date	e of Las 2/1996	
2. Principal F	Place of Business	2a. Mailing Address 26				4. FEI Number APPLIED FOR 59-333 9994 Not Applied For Not Applicable			
Suite, Apt.	#, etc.	Suito, Apt #, etc.				Certificate of Status Desired Status Desired Status Desired Status Desired Status Desired Status Desired			
City & Stat 23		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 10. Name and Address of New Registered Agent			
4444	9. Name and Address of Curre	ent Hegistered Agent		81	Name	10. Name and Address of New He	istered A	gent	
	IANEY, GALONG HIGHWAY A1A		or Name			·			
	ELLITE BEACH FL 32937					ess (P.O. Box Number is Not Acceptable)			
			•	83 84	City			85 Z	ip Code
			<u> </u>			rporation submits this statement for the p	FL	<u> </u>	·
office or	registered agent, or both, in the Stat am familiar with, and accept the obli- signature, typed or printed name of registered a	te of Florida. Such change w gations of, Section 607.0505	as authorized , Florida Stat	d by utes	y the corpora s.	ation's board of directors. I hereby acception of directors and the directors of the direct	t the appo	intment	as registered
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		DIRECT	ORS IN 12
TITLE	D	☐ DELETE	1.1 10	ΊĘ				Chang	
NAME	MAHANEY, GALONG		1.2 NA	ME					Į.
STREET ADDRESS	306 HIGHWAY A1A		1.3 ST	REET	ADORESS				ľ
CITY-ST-ZIP	SATELLITE BEACH FL 32937		1.4 CI	TY-S	ST-ZIP				
TITLE		☐ DELETE	2.1 11	ιF				Chang	
NAME			2 2 N/	ME		8000 0222 -06/24/9	21 L		
STREET ADDRESS	ļ		2381	HEET	ADDRESS	-06/24/3	(/~~U1)	U31	-U12
CITY-ST-ZIP			2.40	1Y-9	ST-ZiP	****165			
TITLE		DELETE	3.1 1(1	Lŧ			L	Chang	e 🔲 Aødilion
NAME			3.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	3.4. C		ST-ZIP			Chang	e [] Addition
TITLE		ב סגונונ	4.7 II 4.2 N				·	Onany	- FORMATION
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			4.4 CI		1				ì
TITLE	 	DELETE	5.1 Til		21 - 211		1	Chang	e Addition
NAME			5.2 NA				-		
STREET ADDRESS	1				ADDRESS				ļ
CITY-ST-ZIP	\$		5.6 CI		1				
TITLE		☐ DELETE	61 TIT				[Chang	e Addition
NAME			62 NA	ME				,	
STREET ADDRESS			63 ST	REET	ADDRESS				ĺ
CITY-ST-ZIP			640	1Y-S	ST - ZIP				\sim

14. I do hereby certify that the information supplied with this filling 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 annual report is true and accurate and that my signature shall have the same legal effect as if made under our lam 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 12 or Block 13 if changed, or on an attrichment with an address.