


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 23, 2004 8:00 am
Secretary of State

09-23-2004 90001 019 ***150.00

DOCUMENT # P96000099834

1. Entity Name
PUTHAI THAI RESTAURANT, INC.



Principal Place of Business Mailing Address
8730-49TH ST **8730-49TH ST**
PINELLAS PARK, FL 33782 **PINELLAS PARK, FL 33782**

24006104



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

09102004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent

~~VONGSA THY~~ *No longer here gone all most 2 years ago*
8730-49TH ST
PINELLAS PARK, FL 33782

7. Name and Address of New Registered Agent

Name **SAM S. ORA-ATH**

Street Address (P.O. Box Number is Not Acceptable)
10743 57th ST N

City **Pinellas Park FL** Zip Code **33782**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SITTHIDETH, PHRATHEP	<i>No longer here.</i>
STREET ADDRESS	5236-88TH TERR N	
CITY-ST-ZIP	PINELLAS PARK, FL 33782	
TITLE	<input type="checkbox"/> Delete	
NAME	ORA-ATH, SAM S	
STREET ADDRESS	10743-57TH ST N	
CITY-ST-ZIP	PINELLAS PARK, FL 33782	
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWNER ORA-ATH SAM S.
STREET ADDRESS	10743 57th ST N
CITY-ST-ZIP	PINELLAS PARK FL 33782
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X SAM ORA-ATH* Date: *9/20/04* Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Attachment
24686182

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 10, 2004

PUTHAI THAI RESTAURANT, INC.
8730-49TH ST
PINELLAS PARK, FL 33782

SUBJECT: PUTHAI THAI RESTAURANT, INC.
Ref. Number: P9600099834

We have received your check(s) totaling \$550.00; however it cannot be processed and is being returned for the following:

~~There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.~~

The fee to file the profit annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

The only provision the Division of Corporations has for waiver of the \$400.00 late fee is if the annual report notice was not received. A letter stating this fact must accompany the completed annual report.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Katrina Sutphin

Letter Number: 504A00054311

Attachment

24680182
P96000099834

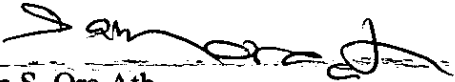
September 7, 2004

Dear Sir or Madam:

Please update your file to the name of Ora Ath, Sam S. as the Primary and only owner of the Puthai Thai Restaurant, Inc. The sales tax number for the year 2004 should be 62-8012075305-7.

Note: I did not get the first notice for the 2004 Annual Report which was due by May 1, 2004. The only notice I received was the letter stating that now the fee is due for \$550.00 by September 8, 2004. My question is if the notice was not notifying me, why do I have to pay for the penalty of \$400.00? Please research your file and let me know by mail or I can be reach at (727)776-3821 anytime.

Thank you for your corporation,



Sam S. Ora Ath

— Please send a new check for
\$150.00 & VOID the ^{\$}550.00 one.

Please include ^{this} letter w/ your form
(which I included). Please sign the
attached form.