


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000009277 1. Entity Name THAI ROOM, INC.			
Principal Place of Business 422 20TH ST ATLANTIC BEACH, FL 32233		Mailing Address 422 20TH ST ATLANTIC BEACH, FL 32233	
DO NOT WRITE IN THIS SPACE			
4. FEI Number 59-3495219		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMPSON, PHET T 422 20TH ST ATLANTIC BEACH, FL 32233		DO NOT WRITE IN THIS SPACE	
6. This 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 registering) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		In accordance with s. 607.153(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD THOMPSON, PHET T 13058 CHET'S CREEK DRIVE NORTH JACKSONVILLE, FL 32224		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD THEPSOUYANH, VORADET 12748 GLADE SPRING DRIVE S DUTH JACKSONVILLE, FL 32246		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE		
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TITLE 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)(f), 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 this 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, or shall other like empowered.			
SIGNATURE: <u>Phet T. Thompson</u> PHET T. THOMPSON		DATE: <u>5-2-05</u> (904)642-9741	