

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State

03-20-2001 90040 001 ***158.75

DOCUMENT # P98000092362

1. Entity Name

INTRACOASTAL DINING, INC.

Principal Place of Business

**9420 RICHMOND CIRCLE
 BOCA RATON FL 33434**

Mailing Address

**9420 RICHMOND CIRCLE
 BOCA RATON FL 33434**

2. Principal Place of Business

350 BAYVIEW DRIVE

Suite, Apt. #, etc.

3. Mailing Address

9420 RICHMOND CIRCLE

Suite, Apt. #, etc.

City & State

SUNNY ISLES BEACH, FL.

City & State

BOCA RATON, FL.

Zip

33160

Country

USA

Zip

33434

Country

USA

4. FEI Number

65-0874143

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BHISTRAKULPORN, GORCHAI WORACHAI
 9420 RICHMOND CIR
 BOCA RATON FL 33434**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/16/01

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

☒

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution.

☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete

NAME **BHISITTRAKULPORN, WORACHAI**
 STREET ADDRESS **9420 RICHMOND CIRCLE**
 CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE **V** ☐ Delete

NAME **BHISTRAKULPORN, RATTANAPORN**
 STREET ADDRESS **9420 RICHMOND PL**
 CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE **S** ☐ Delete

NAME **PHISITTRAKULPORN, SOMCHAI**
 STREET ADDRESS **2535 S.W. 22 AVENUE #103**
 CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **T** ☐ Delete

NAME **PHISITTRAKULPORN, JIRAPORN**
 STREET ADDRESS **2535 S.W. 22 AVENUE #103**
 CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **D** ☐ Delete

NAME **BHISITTRAKULPORN, SUPHOT**
 STREET ADDRESS **9420 RICHMOND CIRCLE**
 CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WORACHAI BHISTRAKULPORN

Date

3/16/01

Daytime Phone #

305-949-667

CR2E034 (10/00)

0306767