

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2002 8:00 am
Secretary of State

07-28-2002 90203 049 ***150.00

DOCUMENT # P99000024267

1. Entity Name

DINER & SUSHI THAI, INC.

Principal Place of Business

**134 N FEDERAL HWY
HALLANDALE FL 33004**

Mailing Address

**134 N FEDERAL HWY
HALLANDALE FL 33004**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0902537

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MONGKOLSINDHU, SARASERN
1801 NE 179TH ST
N MIAMI BEACH FL 33162**

Name

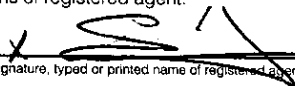
Street Address (P.O. Box Number is Not Acceptable)

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

SIGNATURE  **Sarasern Mongkolsindhu** **7/25/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **MONGKOLSINDHU, SARASERN**
STREET ADDRESS **1801 NE 179TH ST**
CITY-ST-ZIP **N MIAMI BEACH FL 33162**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MASINTAPAN, NITTAYA**
STREET ADDRESS **1801 NE 179 ST**
CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **JINAPORNPHAYAP, JINTANA**
STREET ADDRESS **1098 NE 183 ST**
CITY-ST-ZIP **N MIAMI BEACH FL 33179**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MASINTAPAN, NITTAYA**
STREET ADDRESS **1801 NE 179 ST**
CITY-ST-ZIP **N MIAMI BEACH FL 33162**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

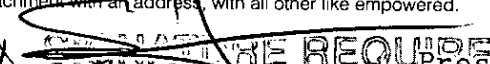
TITLE ☐ Delete
NAME
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TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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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:  **Sarasern Mongkolsindhu** **7/25/02** **954-454-0023**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment
B0132651

DINER & SUSHI THAI INC
134 North Federal Hwy
Hallandale, Fl 33004
Telephone: 954-454-0023

July 25, 2002

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, Fl 32302-1500

Re: P99000024267

Dear Sir/Madam:

We have just received the attached 2002 Uniform Business Report. We have never received the first one.

Please accept the attached check in the amount of \$150.00 for the filing fees.

Your consideration is greatly appreciated.

Sincerely,



Sarasern Mongkolsindhu
President