

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P99000026971

1. Entity Name
SIAM GARDEN RESTAURANT INCORPORATED



Principal Place of Business
**1111 W WEBSTER AVE
WINTER PARK, FL 32789**

Mailing Address
**1111 W WEBSTER AVE
WINTER PARK, FL 32789**



03242005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3538774

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CHANTARA, YOUTH
4489 N PINE HILLS RD
ORLANDO, FL 32808**

**DO NOT WRITE
IN THIS SPACE**

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 *YOUTH CHANTARA*

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

(NOTE: Registered Agent signature required when reinstating)

3-25-05
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PHEWKUM, MANO
453 E HIGHLAND ST
ALTAMONTE SPRINGS, FL 32701**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PHOMMACHANH, MOUANE
453 E HIGHLAND ST
ALTAMONTE SPRINGS, FL 32701**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PHEWKUM, JESSICA
453 E HIGHLAND ST
ALTAMONTE SPRINGS, FL 32701**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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04/04/05-80006-009 150.00

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 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: *L. Phewkum*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-29-05