FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S64826 (8)

1. Corporation Name
THAI VENTURES LTD., INC.

Principal Place of Business
2300 GULF BLVD.
INDIAN ROCKS BEACH FL 34635

Mailing Address
2300 GULF BLVD.
INDIAN ROCKS BEACH FL 34635

3. Date Incorporated or Qualified: 07/02/1991
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-3076368 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

BOBIER, ROGER, L.
2504 GULF BLVD.
UNIT 501
INDIAN ROCKS BEACH FL 34635

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] ROGER L BOBIER 3/25/96
Signature, typed or printed name of registered agent and title if applicable / DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	RUKKARNPATEGA, APICHART	
STREET ADDRESS	111 23RD ST	
CITY-ST-ZIP	BELLEAIR BEACH FL 34634	
TITLE	CEO	☐ DELETE
NAME	BOBIER, ROGER	
STREET ADDRESS	2504 GULF BLVD, UNIT. 501	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 34635	
TITLE	VP	☐ DELETE
NAME	RUKKARNPATEGA, SURANG	
STREET ADDRESS	111 23RD ST	
CITY-ST-ZIP	BELLEAIR BEACH FL 34634	
TITLE	VP	☐ DELETE
NAME	BOBIER, DEBRA	
STREET ADDRESS	2504 GULF BLVD UNIT 501	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 34635	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] ROGER L BOBIER 3/25/96 813 593-3663
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / DATE / Daytime Phone #

CR2E034 (12/95)