

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000049341

**Entity Name:** WICHAI, INC.

**Current Principal Place of Business:**

1033 CEDAR FALLS DR  
WESTON, FL 33327

**Current Mailing Address:**

1033 CEDAR FALLS DR  
FORT LAUDERDALE, FL 33327

**FEI Number:** 65-0848603

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

THERATHANAKORN, WICHAI  
1033 CEDAR FALLS DR  
FORT LAUDERDALE, FL 33327 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name THERATHANAKORN, WICHAI  
Address 1033 CEDAR FALLS DR  
City-State-Zip: FORT LAUDERDALE FL 33327

Title OFFICER  
Name THERATHANAKORN, VENA  
Address 1033 CEDAR FALLS DR  
City-State-Zip: WESTON FL 33327

Title OFFICER  
Name THERATHANAKORN, ANDY  
Address 1033 CEDAR FALLS DR  
City-State-Zip: WESTON FL 33327

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** WICHAI THERATHANAKORN

**MANAGER**

**04/09/2023**

Electronic Signature of Signing Officer/Director Detail

Date