2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J55435

19085 N.W. 62ND AVE.

MIAMI, FL

Address: City-St-Zip: FILED Mar 02, 2004 Secretary of State

2001	000	100		ocorciary or oracc	
Entity Nar	me: THERMA	L DYNAMICS, INC.			
Current P	rincipal Place	of Business:	New Principal Place	e of Business:	
7792 NW 5 MIAMI, FL					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
4835 E 11TH AVE HIALEAH, FL 330134119			7792 N.W. 54TH STF MIAMI, FL 33166	7792 N.W. 54TH STREET MIAMI, FL 33166	
FEI Number:	: 59-2843791	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
7792 NW 5	S, CHARLES N 54TH ST 331663220 U				
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () CISNEROS, CH 7792 NW 54TH MIAMI, FL 331	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () CISNEROS, CO 7792 NW 54TH MIAMI, FL 331	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DVP () CISNEROS, JC) Delete SEPH M.,	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: CHARLES CISNEROS MGR 03/02/2004