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FILED

Jan 28 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K21754 (2)

1. Corporation Name  
THERMA, CORP.

Principal Place of Business

7403 SW 42ND ST  
MIAMI FL 33155  
US

Mailing Address

7403 SW 42ND ST  
MIAMI FL 33155-4402  
US

3. Date Incorporated or Qualified

04/21/1988

3a. Date of Last Report

07/05/1996

2. Principal Place of Business

21 7403 SW 42nd ST

2a. Mailing Address

26 7403 SW 42nd ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City &amp; State

23 MIAMI

27 City &amp; State

28 MIAMI

Zip

24 33155

Country

25 USA

Zip

29 33155

Country

30 USA

4. FEI Number

65-0048206

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

BARTOCCI, GEORGE C.  
7403 SW 42ND ST  
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name Celina M. Franco

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

3850 IRVINGTON AVE

83

84 City Miami

FL

85 Zip Code 33133

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 of current registered agent and officer, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

01/01/97

12. OFFICERS AND DIRECTORS

TITLE PDI ☒ DELETENAME BARTOCCI, GEORGE C.  
STREET ADDRESS 3850 IRVINGTON AVE  
CITY-ST-ZIP COCONUT GROVE FLTITLE SOV ☐ DELETENAME FRANCO, CELINA  
STREET ADDRESS 3850 IRVINGTON AVE  
CITY-ST-ZIP COCONUT GROVE FLTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition1.2 NAME President, Director, Treasurer  
CELINA M. FRANCO  
1.3 STREET ADDRESS 3850 IRVINGTON Avenue  
1.4 CITY-ST-ZIP Miami Fla 331552.1 TITLE ☒ Change ☐ Addition2.2 NAME Secretary, Director, Vice President  
Celina Franco  
2.3 STREET ADDRESS 3850 IRVINGTON Avenue  
2.4 CITY-ST-ZIP Miami Fla. 331553.1 TITLE ☐ Change ☐ Addition3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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 on an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director

Celina M. Franco

01/21/97 (305) 262-6664

Date

Daytime Phone #

0210537

CR2E034 (9/96)