1 of 2

2001 UNIFORM BUSINESS REPORT (UBR)

2002

DOCUMENT # L00000012792

1. Entity Name

THOR, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 FEB 21 PM 2:15

Principal Place of Business	Mailing Address
7825 NW 193 TERR MIAMI, FL 33015	7825 NW 193 TERR MIAMI, FL 33015

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 71-6932356 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HAROLD VARGAS 7825 NW 193 TERR MIAMI, FL 33015	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE Harold Vargas 8-13-2001

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NO. MUST BE TYPED OR PRINTED IN BLACK INK

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HAROLD VARGAS 7825 NW 193 TERR MIAMI, FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition FF $100.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 700005021847--1 -02/26/02--01073--001 ****100.00 ****100.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 2/21/02
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (11/00)

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Harold Vargas MANAGER 8-13-2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

THOR, LLC
7825 NW 193 TERR
Miami, FL 33015

AUGUST 13, 2001

FLORIDA DEPARTMRNT OF STATE
RE: DOCUMENT #L00000012792
FEI # 71-6932356

TO WHOM IT MAY CONCERN:

I'M SENDING MY UNIFORM REPORT 2001, LATE BECAUSE I NEVER RECEIVED ORIGINAL ANNUAL REPORT, I WILL APPRECIATE IF YOU WAIVE THE LATE CHARGES.

ATTACHED IS THE APPLICATION WITH A CHECK IN THE AMOUNT OF $150.00 FOR THE YEARS 2001.

SINCERELY YOURS

HAROLD VARGAS
MANAGER