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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P94000044903 (0)

THUNDER IMPORT & EXPORT, INC.

Principal Place of Business Mailing Address 6925 NW 51ST ST 89 25 NW 51ST MIAM! FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/15/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0496865 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution П Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HENAO ROMANO, GLORIAO O -- 0595 N.W. 30 GT. ≠207-A-MIAMI FL-03166~ 83 84 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 regulared agent, or both, in the State of Honda. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lamfamiliar with and accept the abjustines of, Section 607 0505, Florida Statutes. 02-20-98 SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DE LE TE Change TITLE 1.1 TITLE NIETO, ALBERTO J 1.2 NAME NAME 11470 SW 14800 STREET ADDRESS 13 STREET ADDRES MIAMI-FL-1.4 CHTY - ST - ZIP CITY - ST - ZIP DELETE Change 21 11116 TITLE CARDONA, CLAUDIA 2.2 NAME NAME 414-70-SW 140-OT-2.3 STREET ADDRESS STREET ADDRESS MAMI FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 agreed report is flue 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 on the receiver or trustee oppowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of changed, or of an alterity and that my didess.

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 City - ST - ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

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DETETE

DELETE

04-20-98 (301)5922121

Addition

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Feb 25 1998 8:00am

Secretary of State