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PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P94000060393 (3)

DOCUMENT # 1. Corporation Name	P94000060393	(3
THUNDER WHEELS	SKATING CENTER, INC.	

Principal Place of Business Mailing Address 4135 W 6TH AVE 4135 W 6TH AVE HIALEAH FL 33012 HIALEAH FL 33012 3. Date Incorporated or Qualified 3a. Date of Last Report 08/17/1994 05/01/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 8348 N.W 26 65-0514612 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032 29 30 Florida Statutes Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MARTIN, MEDARDO M 82 Street Address (P.O. Box Number is Not Acceptable) 4135 W 6TH AVE HIALEAH FL 33012 83 84 City Zip Code 85 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 Spile of Florid Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am lorida Statutes MEDARDO H. Martin SIGNATURE OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1 TITLE Addition Change | CR2E034 (MARTIN, MEDARDO M NAME 1.2 NAME 4135 W 6TH AVE STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIF 1.4 CHY-SI-ZIF TITLE ☐ DELETE 2 1 TITLE Change Addition RODRIGUEZ, LUIS R NAME 2.2 NAME 1042 W 50TH PL STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE ☐ DELETE 3 1 TITLE ☐ Change ■ Addition HABER, PEDRO R NAME 3.2 NAME 6630 NW 41ST ST STREET ADDRESS 3.3 STHEET ADDRESS VIRGINIA GARDENS FL 33166 CITY-ST-7/P 3.4 CITY - ST - 2IP DELETE THILE 4 1 TITLE Change | ☐ Addition MARTIN, ANA I NAME 4.2 NAME 4135 W 6TH AVE STREET ADDRESS 4.3 STREET ADDRESS HIALEAH FL 33012 CITY - ST - ZiP 4.4 City - ST - ZiP DELETE TITLE 5 1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 5 4 CiTY - ST - ZIP TITLE ☐ DELETE 6 1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the exemption stated in Section 119.07(3)(k). 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 this comporation or the receiver or trusted employeed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block or Block of the comporation or the receiver or trusted employeed to execute this report as required by Chapter 607, Florida Statutes, and that my name

MEDARDO M. MARtin 5/6/96 SIGNATURE

City - St - 7iE