

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 MAY 10 PM 1:48

DOCUMENT # P94000069841 (2)

1. Corporation Name

THUNDERBOLT DISTRIBUTING, INC.



Principal Place of Business

2668 S.W. 23RD CRANBROOK DRIVE
BOYNTON BEACH FL 33436

Mailing Address

2668 S.W. 23RD CRANBROOK DRIVE
BOYNTON BEACH FL 33436

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/20/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0520098

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

LAMONTAGNE, KEVIN M
2668 S.W. 23RD CRANBROOK DRIVE
BOYNTON BEACH FL 33436

81 Name

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

83

84 City

200001825362
-05/16/96--0113--017
****233.75 ****233.75
FL 85 Zip Code

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 typed in printed name of registered agent or director

Print Name (Agent Signature Required when Changing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
P
NOVITA, JACK
2668 SW 23RD CRANBROOK DR.
BOYNTON BEACH FL 33436

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
VP
NOVITA, BERNARD
2668 SW 23RD CRANBROOK DR.
BOYNTON BEACH FL 33436

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
ST
FISHMAN, JR
1231 NE 8TH AVE.
FT. LAUDERDALE FL 33304

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
VP
HODGE, DAVID
1231 NE 8TH AVE.
FT. LAUDERDALE FL 33304

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP
S/T
S. HAMES-NOVITA
2668 SW 23RD CRANBROOK DRIVE
BOYNTON BEACH, FLORIDA 33436

2.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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, or on an attachment with an address.

SIGNATURE:

S. HAMES-NOVITA, Sec. Treas.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 7, 1996 407 734 1237
Date: Officer's Phone #

CR2E034 (12/95)