SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 8/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000075964 (2)

MOUNTAIN THUNDER, INC.

FILED Sep 17 1997 8:00am Secretary of State



Dain sin al Dia a	a of Business	Mailing Address			IKE BBEH PBBBI DIAN ANIB BIRH BIBA NDI
Principal Plac		Mailing Address			
301 N.E. 96TH MIAMI SHORE		301 N.E. 96TH STREET MIAMI SHORES FL 33138			
	.0 12 00:00	MINMI OFOREO 12 99190		DO NOT WRITE	IN THIS SPACE
				3. Date incorporated or Qualified	3a. Date of Last Report
				09/09/1996	
2. Principal P	lace of Business	28. Mailing Address		4. FEI Number	Applied For
21 6/0 8/90	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	26 Clo Bloom + Unfi	man	65-0699838	Not Applicable
Suite, Apl.		Suite, Apt. #, etc.	1 0	5. Certificate of Status Desired	\$8.75 Additional
22 // 01	BRICKELL AVE STE	. 27 1101 BRICKE	CLAIE STUL	460 Lestinicate di Status Desired	Fee Required
City & Stat	e //Yo	City & State		6. Election Campaign Financing	\$5.00 May Be
23 MIA.	MI FC	28 MIAM, F	-	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pa	d the current year Intangible
24 33		29 33/3/ 30		Personal Property Tax due June	
	9. Name and Address of Current	Registered Agent	<u> </u>	10. Name and Address of New Re	gistered Agent
	RD, WILLIAM E III		81 Name	12	ILLIAME, FORD TH
301 N.E. 96TH STREET				dress (P.O. Box Number is Not Acceptab	
MIAMI SHORES FL 33138 76BLOOM +					
			83 //0/	BRICKELL AVE	Sor 1400
			84 City	PRICKECT INC	- 65 Zip Code
			1 300	19m1	FL 333731
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 agont, 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 a	in familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statutes.	ation's board of directors. Thereby accept	the appointment as registered
SIGNATURE	William 3 to.	ATT PRES		7/20/97	
	Signature, typod or printed name of registered agent		gistored Agent signature requ		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	CODD MINITARA E III	☐ DELETE	1.1 TITLE		Change Addition
NAME	FORD, WILLIAM E III 301 N.E. 96TH STREET		1.2 NAME		[5]
STREET ADDRESS	MIAMI SHORES FL 33138		1.3 STREET ADDRESS		រ្គ័
CITY-ST-ZIP	MIAMI SHUNES PL 33130	C OFFERS	1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change L Addition C
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		i
CITY-ST-ZIP		T logicy:	2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TATLE		Change Addition
NAME			3.2 NAME		}
STREET ADDRESS			3.3 STREET ADDRESS		-
CITY-ST-ZIP			3.4. CITY-S1-ZIP		
TITLE		DELETE	4.1 TITLE		Change
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		l
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		1
			6.4 CITY-ST-ZIP		

14. I do hereby 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 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.