

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000004528

**Entity Name:** TABACALERA USA INC.**Current Principal Place of Business:**5900 N ANDREWS AVE STE 600  
FT LAUDERDALE, FL 33309-2354**Current Mailing Address:**5900 N ANDREWS AVE STE 600  
FT LAUDERDALE, FL 33309-2354**FEI Number:** 30-0884509**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 US*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, SECRETARY, CFO  
Name COLL, PABLO  
Address 5900 N ANDREWS AVE STE 600  
City-State-Zip: FT LAUDERDALE FL 33309-2354

Title VP  
Name WALTON, RHONDETTA  
Address 5900 N ANDREWS AVE STE 600  
City-State-Zip: FT LAUDERDALE FL 33309-2354

Title PRESIDENT, CEO  
Name ESTADES SAEZ JOHANSSON, ANGEL  
XAVIER  
Address 5900 N ANDREWS AVE STE 600  
City-State-Zip: FT LAUDERDALE FL 33309-2354

Title DIRECTOR, GENERAL COUNSEL, VP  
Name LUKOSE, MILLIE  
Address 5900 N ANDREWS AVE STE 600  
City-State-Zip: FT LAUDERDALE FL 33309-2354

Title DIRECTOR  
Name DOMINGUEZ, FERNANDO  
Address 5900 N ANDREWS AVE STE 600  
City-State-Zip: FT LAUDERDALE FL 33309-2354

Title VP HUMAN RESOURCES  
Name WILLIAMS, JASON  
Address 5900 N ANDREWS AVE STE 600  
City-State-Zip: FT LAUDERDALE FL 33309-2354

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** PABLO COLL**SECRETARY****04/23/2022**

Electronic Signature of Signing Officer/Director Detail

Date