## 2005 FOR PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 145666** 

**Entity Name: OLIVA TOBACCO COMPANY** 

FILED Jun 09, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3104 N ARMENIA AVE TAMPA, FL 33607

**Current Mailing Address: New Mailing Address:** 

2008 18TH ST P.O. BOX 2206 P O BOX 2206 TAMPA, FL 33601 TAMPA, FL 33605

FEI Number: 59-0383380 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OLIVA, JOHN E OLIVA, JOHN E SR 3104 N ARMENIA AVE 3104 N ARMENIA AVE TAMPA, FL 33607 TAMPA, FL 33607

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: JOHN E. OLIVA 06/09/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

OLIVA, JOHN, Name: Name: OLIVA, JOHN E SR 3104 N ARMENIA AVE 3104 N ARMENIA AVE Address: Address: TAMPA, FL 33607 City-St-Zip: City-St-Zip: TAMPA, FL 33607

Title: VPD Title: VPD (X) Change ( ) Addition () Delete

OLIVA, ANGEL, JR, Name: Name: OLIVA, ANGEL JR. 3104 N ARMENIA AVE 3104 N ARMENIA AVE Address: Address: TAMPA, FL 33607 TAMPA, FL 33607 City-St-Zip: City-St-Zip:

Title: Title: SDTD ( ) Delete SDTD (X) Change ( ) Addition

OLIVA, JOHN E J OLIVA, JOHN E JR Name: Name: 5118 LONGFELLOW AVE 3921 W SAN LUIS ST Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33629

Title: () Delete Title: (X) Change ( ) Addition

OLIVA, III, ANGEL OLIVA, ANGEL III Name: Name: Address: 2907 W. ESTRELLA ST. Address: 2907 W. ESTRELLA ST. City-St-Zip: City-St-Zip: TAMPA, FL 33629 TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN E OLIVA JR SDTD 06/09/2005