2004 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** May 03, 2004 08:00 AM **DOCUMENT # 298161 Secretary of State** 1. Entity Name INTER-AMERICA CIGAR COMPANY Principal Place of Business Mailing Address 1876 N.W. 21ST TERRACE 1876 N.W. 21ST TERRACE MIAMI, FL 33142 MIAMI, FL 33142 04222004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied 59-1150166 Not App \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOMEZ, BENJAMIN DO NOT WRITE 1010 N.W. 27 COURT MIAMI, FL 33125 IN THIS SPACE 8. 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. I am familiar with, and a the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS NAME GOMEZ, BENJAMIN JR. U00000151520 05/04/04-80048-024 150.00 525 WEST 39 PLACE STREET ADDRESS HIALEAH, FL 33012 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TELE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not quality 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 signature shall have the same legal effect as if made under oath; that I am an officer or directly 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 10 or Block of changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

4/28/04