

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 339757

FILED
Mar 21, 2006
Secretary of State

Entity Name: ARTURO FUENTE CIGAR FACTORY, INC.

Current Principal Place of Business:

1310 NORTH 22ND ST.
TAMPA, FL 336055317 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 75827
TAMPA, FL 33675 US

New Mailing Address:

FEI Number: 59-1287206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARP, WILLIAM M
4890 W KENNEDY BLVD
STE. 900
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

SHARP, WILLIAM M SR
4890 W KENNEDY BLVD
STE. 900
TAMPA, FL 33609 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: WILLIAM M. SHARP, SR.

03/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSDT () Delete
Name: SUAREZ, CYNTHIA F.
Address: 1310 N 22ND ST
City-St-Zip: TAMPA, FL

Title: VD () Delete
Name: FUENTE, CARLOS A
Address: 1310 N 22ND ST
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: FUENTE, CARLOS P
Address: 1310 N 22ND STREET
City-St-Zip: TAMPA, FL 336055317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSDT (X) Change () Addition
Name: SUAREZ, CYNTHIA F
Address: 1310 N 22ND ST
City-St-Zip: TAMPA, FL 336055317

Title: VD (X) Change () Addition
Name: FUENTE, CARLOS A
Address: 1310 N 22ND ST
City-St-Zip: TAMPA, FL 336055317

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CARLOS A. FUENTE

V

03/21/2006

Electronic Signature of Signing Officer or Director

Date