2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 339757

Entity Name: ARTURO FUENTE CIGAR FACTORY, INC.

FILED Jan 12, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1310 NORTH 22ND ST. TAMPA, FL 336055317 US

Current Mailing Address: New Mailing Address:

P O BOX 75827 P O BOX 5175

TAMPA, FL 33675 US TAMPA, FL 33675 US

FEI Number: 59-1287206 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:

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

SMITH, KAREN R
1310 NORTH 22ND STREET
TAMPA, FL 336055317 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: KAREN R SMITH 01/12/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSDT () Delete Title: P (X) Change () Addition Name: SUAREZ, CYNTHIA F Name: SUAREZ, CYNTHIA F

 Address:
 1310 N 22ND ST
 Address:
 1310 N 22ND ST

 City-St-Zip:
 TAMPA, FL 336055317
 City-St-Zip:
 TAMPA, FL 336055317

Title: VD () Delete Title: () Change () Addition

 Name:
 FUENTE, CARLOS A
 Name:

 Address:
 1310 N 22ND ST
 Address:

 City-St-Zip:
 TAMPA, FL 336055317
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 FUENTE, CARLOS P
 Name:

 Address:
 1310 N 22ND STREET
 Address:

 City-St-Zip:
 TAMPA, FL 336055317
 City-St-Zip:

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

 Name:
 Name:
 SMITH, KAREN R

 Address:
 Address:
 1310 N 22ND STREET

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 336055317

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: KAREN R. SMITH VP 01/12/2007