## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 339757** 

Entity Name: ARTURO FUENTE CIGAR FACTORY, INC.

FILED Jan 14, 2009 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 5175 TAMPA, FL 336755175 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:

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:

City-St-Zip:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition SUAREZ, CYNTHIA F SUAREZ, CYNTHIA F Name: Name: 1310 N 22ND ST 1310 N 22ND ST Address: Address:

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

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

Name: FUENTE, CARLOS A Name: FUENTE, CARLOS A 1310 N 22ND ST 1310 N 22ND ST Address: Address: TAMPA, FL 336055317 TAMPA, FL 336055317 US City-St-Zip:

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

FUENTE, CARLOS P FUENTE, CARLOS P Name: Name: 1310 N 22ND STREET 1310 N 22ND STREET Address: Address: City-St-Zip: TAMPA, FL 336055317 City-St-Zip: TAMPA, FL 336055317 US

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

SMITH, KAREN R SMITH, KAREN R Name: Name: Address: 1310 N 22ND STREET Address: 1310 N 22ND STREET City-St-Zip: TAMPA, FL 336055317 City-St-Zip: TAMPA, FL 336055317 US

I hereby certify that the information supplied with this filing does not qualify 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.

VΡ SIGNATURE: KAREN R. SMITH 01/14/2009