

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 522832

FILED
Apr 23, 2007
Secretary of State

Entity Name: MARIBEL CIGARS, INC.

Current Principal Place of Business:

1313 PONCE DE LEON BLVD #201
STE. 300
CORAL GABLES, FL 33134 US

Current Mailing Address:

1313 PONCE DE LEON BLVD #201
STE. 300
CORAL GABLES, FL 33134 US

FEI Number: 59-1754874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, BENITO P.
3067 S.W. 18TH ST.
MIAMI, FL 33125 US

New Principal Place of Business:

1313 PONCE DE LEON BLVD.
SUITE 201
CORAL GABLES, FL 33134 US

New Mailing Address:

1313 PONCE DE LEON BLVD.
SUITE 201
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GARCIA, MARILSA
3067 S.W. 18TH ST.
MIAMI, FL 33125 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: MARILSA GARCIA

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTINEZ, BENITO,
Address: 3067 S.W. 18TH ST.
City-St-Zip: MIAMI FL,

Title: VD () Delete
Name: GARCIA, MODESTO,
Address: 3065 S.W. 18TH ST.
City-St-Zip: MIAMI FL,

Title: SD (X) Delete
Name: GARCIA, MARILSA
Address: 3065 S.W. 18TH ST.
City-St-Zip: MIAMI FL,

Title: TD () Delete
Name: PEREZ, MARIBEL,
Address: 3067 S.W. 18TH ST.
City-St-Zip: MIAMI FL,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: GARCIA, MARILSA
Address: 3067 S.W. 18TH ST.
City-St-Zip: MIAMI, FL 33125

Title: VD (X) Change () Addition
Name: GARCIA, MODESTO
Address: 3065 S.W. 18TH ST.
City-St-Zip: MIAMI, FL 33125

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

Title: TD (X) Change () Addition
Name: PEREZ, MARIBEL
Address: 3067 S.W. 18TH ST.
City-St-Zip: MIAMI, FL 33125

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: MARILSA GARCIA

PDS

04/23/2007

Electronic Signature of Signing Officer or Director

Date