

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000132

Entity Name: NEVADA CIGAR CORPORATION

FILED
Jul 17, 2005
Secretary of State

Current Principal Place of Business:

5133 NW 122ND AVE.
CORAL SPRINGS, FL 33076

New Principal Place of Business:

Current Mailing Address:

5133 NW 122ND AVE.
CORAL SPRINGS, FL 33076

New Mailing Address:

FEI Number: 88-0344816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEVENS, WILLIAM R
5133 NW 122ND AVE.
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

STEVENS, ROCHELLE
5133 NW 122ND AVE.
CORAL SPRINGS, FL 33076 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: ROCHELLE STEVENS

07/17/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: STEVENS, WILLIAM R
Address: 5133 NW 122ND AVE.
City-St-Zip: CORAL SPRINGS, FL 33076

Title: S () Delete
Name: STEVENS, ROCHELLE
Address: 5133 NW 122ND AVE.
City-St-Zip: CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: STEVENS, ROCHELLE
Address: 5133 NW 122ND AVE.
City-St-Zip: CORAL SPRINGS, FL 33076

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 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 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: ROCHELLE STEVENS

CP

07/17/2005

Electronic Signature of Signing Officer or Director

Date