

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004532

FILED  
Mar 29, 2005  
Secretary of State

Entity Name: DOMREY CIGAR, LTD. COMPANY

**Current Principal Place of Business:**

1812 44TH AVENUE EAST  
BRADENTON, FL 34203

**New Principal Place of Business:**

**Current Mailing Address:**

1812 44TH AVENUE EAST  
BRADENTON, FL 34203

**New Mailing Address:**

FEI Number: 04-3326361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHIUSANO, MICHAEL  
2447 57TH STREET  
SARASOTA, FL 34243 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: CHIUSANO, MICHAEL  
Address: 2447 57TH STREET  
City-St-Zip: SARASOTA, FL

Title: D ( ) Delete  
Name: FINLEY, WILLIAM  
Address: 2447 57TH STREET  
City-St-Zip: SARASOTA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: MICHAEL CHIUSANO

PCD

03/29/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date