FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700003150 (6)

WORLD CIGARS OF LITTLE HAVANA, INC.

FILED Feb 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					-	OBERT HINDI HUDI		
744 SW 8TH ST 744 SW 8TH ST MIAMI FL 33130 MIAMI FL 33130								
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		j
District Dis						06/17/1997		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	 	pplied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.						65-0705287		ot Applicable
27						5. Certificate of Status Desired	+	Additional equired
	City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23	28					Trust Fund Contribution		to Fees
Zip	Country	Zip	—	intry		8. This corporation owes or has paid the co	T	,
24	25 29 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No			
ORTEGA, EDUARDO					Hamo			
744 SW 8TH ST Miami Fl 33130				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)		
n	INCHII I L 00 100			83		· · · · · · · · · · · · · · · · · · ·		
				84	City		85 Zip	Code
						FI	<u>-</u> `	ŀ
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed hards of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaing) DATE								
12.	Signature, typed or printed harne of registered agr	D DIRECTORS	13.	d Age	nt signature require:	d when reinstating) DAT(ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	20 IAI 20
TITLE			1.1 T(TLE		ADDITIONS/CHANGES TO OTHER IS AN	Change	Addition
NAME	ORTEGA, EDUARDO			1.2 NAME		•	_ ,	_
STREET ADDRESS	744 SW 8TH ST		1.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZiP	MIAMI FL 33130		1.4 CITY-					
TITLE	——————————————————————————————————————			2.1 TITLE			Change	Addition
NAME	CIPPARONE, DELORES O		2.2 NAME					
STREET ADDRESS	744 SW 8TH ST		23 STREET		ADDRESS			
CITY-ST-ZIP	MIAMI FL 33130		2 4 CITY-ST		T - ZIP			
TITLE	Ť	☐ DELETE	3 1 T	3 1 TITLE			☐ Change	Addition
NAME	EWEN, HENRY		3.2 N/	3.2 NAME				
STREET ADDRESS				3.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33130		3.4. C	3.4. CITY-ST-ZIP				
TITLE		∐ DELET E	4.1 30				☐ Change	Addition
NAME			4. 2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CI		I - ZIP			T Addition
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition
NAME			5.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CI 6.1 TI		1 - ZIP		Change	Addition
		F1 order					Olionide.	L. Addition
NAME exect annouses			6.2 NA		ADDRESS			
STREET ADDRESS					ADDRESS			
City-ST-ZIP	Lertify that the information supplied w	ith this filing does not qualify	6.4 CI for the exe			Section 119.07(3)(i), Florida Statutes, I further of	ertify that the	information

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 in Block 12 or Block 13 if changed, or on an attachment with an address.