

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000018276

Entity Name: CIGARS 90 PLUS, LLC

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1220 WEST NEW HAVEN AVENUE, SUITE 140  
WEST MELBOURNE, FL 32904

**New Principal Place of Business:**

1220 WEST NEW HAVEN AVENUE  
SUITE 140  
WEST MELBOURNE, FL 32904

**Current Mailing Address:**

1220 WEST NEW HAVEN AVENUE, SUITE 140  
WEST MELBOURNE, FL 32904

**New Mailing Address:**

1220 WEST NEW HAVEN AVENUE  
SUITE 140  
WEST MELBOURNE, FL 32904

FEI Number: 26-4355020

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KINBERG, EDWARD J  
C/O KINBERG & ASSOCIATES, LLC  
1290 W. EAU GALLIE BLVD.  
MELBOURNE, FL 32935 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WIMBERLY, ALEX  
Address: 7922 TIMBERLAKE DRIVE  
City-St-Zip: MELBOURNE, FL 32904

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALEX WIMBERLY

MGRM

03/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date