

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000115326

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** PANAMA CARIBBEAN TOBACCO, LLC

**Current Principal Place of Business:**

2018 SE 21ST STREET  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

2018 SE 21ST STREET  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 27-1418457

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLOW, DALE  
2018 SE 21ST STREET  
CAPE CORAL, FL 33990 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:** MGR  
**Name:** BLOW, DALE  
**Address:** 2018 SE 21ST STREET  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** MGR  
**Name:** BLOW, JON  
**Address:** 2208 SW 14TH PLACE  
**City-St-Zip:** CAPE CORAL, FL 33991

**Title:** MGR  
**Name:** BLOW, FRANK  
**Address:** 1806 SE 19TH LANE  
**City-St-Zip:** CAPE CORAL, FL 33990

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:** DALE A. BLOW

MGR

02/18/2010

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