

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000038858

Entity Name: CIGARAS, LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2730 US 1 SOUTH SUITE Q  
SUITE Q  
SAINT AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

2730 US 1 SOUTH SUITE Q  
SUITE Q  
SAINT AUGUSTINE, FL 32086

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAFLEUR LAW FIRM  
2730 US 1 SOUTH  
SUITE Q  
SAINT AUGUSTINE, FL 32086 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: FLEUR DE LIS VENTURES, LLC  
Address: 2730 US 1 SOUTH, SUITE Q  
City-St-Zip: SAINT AUGUSTINE, FL 32086 US

Title: MGRM  
Name: ANASTASIA IMPORTS, LLC  
Address: 141 MARSHSIDE DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

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: FLEUR DE LIS VENTURES, LLC

MGRM

01/04/2012

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