

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000000375

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: KEY WEST CIGAR FACTORY LLC

**Current Principal Place of Business:**

5960 WEST PARKER RD SUITE 278  
PMB 262  
PLANO, TX 75093

**New Principal Place of Business:**

501 FRONT STREET  
CART #1  
KEY WEST, FL 33040

**Current Mailing Address:**

5960 WEST PARKER RD SUITE 278  
PMB 262  
PLANO, TX 75093

**New Mailing Address:**

FEI Number: 26-0480467      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CAVANAUGH, PAUL  
533 WILLIAM STREET APT. #1  
KEY WEST, FL 33040 US

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

CAVANAUGH, PAUL  
538 WHITE STREET  
APT #1  
KEY WEST, FL 33040 US

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:

01/05/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: UHLMAN, DAVE  
Address: 409 N. PACIFIC COAST HIGHWAY SUITE 322  
City-St-Zip: REDONDO BEACH, CA 90277

Title: MGR ( ) Delete  
Name: HIRSCHMAN, STAN  
Address: 5960 WEST PARKER RD SUITE 278  
City-St-Zip: PLANO, TX 75093

**ADDITIONS/CHANGES:**

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 exemption stated in Chapter 119, Florida Statutes. I further 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: STAN HIRSCHMAN

MGR

01/05/2009

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