

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# M15986

**FILED**  
**Jun 24, 2011**  
**Secretary of State**

**Entity Name:** MIKE'S CIGARS DISTRIBUTORS, INC.

**Current Principal Place of Business:**

1030 KANE CONCOURSE  
BAY HARBOR, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

1030 KANE CONCOURSE  
BAY HARBOR, FL 33154

**New Mailing Address:**

**FEI Number:** 59-2536886

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BORUCHIN, DIANA ESQ  
1024 KANE CONCOURSE  
BAY HARBOUR, FL 33154 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

**OFFICERS AND DIRECTORS:**

Title: CH  
Name: BORUCHIN, OSCAR  
Address: 9999 COLLINS AVE., SUITE 6A  
City-St-Zip: BAL HARBOR, FL 33154

Title: VCH  
Name: BORUCHIN, ROSE  
Address: 9999 COLLINS AVE., SUITE 6A  
City-St-Zip: BAL HARBOR, FL 33154

Title: PCEO  
Name: BEN-ARIE, ODED  
Address: 130 BISCAY DRIVE  
City-St-Zip: BAL HARBOUR, FL 33154

Title: VS  
Name: BEN-ARIE, DIANA  
Address: 130 BISCAY DRIVE  
City-St-Zip: BAL HARBOUR, FL 33154

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal 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 above, or on an attachment with all other like empowered.

SIGNATURE: DIANA BEN-ARIE

VS

06/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date