2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008635

Entity Name: CIGAR CITY MOTOR LEASING, INC.

FILED Jan 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6930 N. DALE MABRY HWY TAMPA, FL 33614 **Current Mailing Address: New Mailing Address:** 1306 W KENNEDY BLVD TAMPA, FL 33606 FEI Number: 59-3371496 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STRASKE, STEPHEN B II 1306 WEST KENNEDY BLVD. TAMPA, FL 33606 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition FERMAN, CECELIA Name: Name: 1306 W KENNEDY BLVD Address: Address: City-St-Zip: TAMPA, FL 336061849 City-St-Zip: Title: Title: () Delete () Change () Addition Name: FARRIOR, LAURA Name: 1306 W KENNEDY BLVD Address: Address: TAMPA, FL 336061849 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BRAKEMAN, JAMES E Name: Name: 1306 W KENNEDY BLVD Address: Address: City-St-Zip: TAMPA, FL 336061849 City-St-Zip: Title: DP () Delete Title: () Change () Addition FARRIOR, PRÉSTON Name: Name: Address: 1306 W KENNEDY BLVD Address: City-St-Zip: TAMPA, FL 336061849 City-St-Zip: Title: Title: () Delete () Change () Addition FERMAN JR, JAMES L Name: Name: 1306 W KENNEDY BLVD Address: Address: City-St-Zip: TAMPA, FL 336061849 City-St-Zip: Title: DVST () Delete Title: () Change () Addition Name: STRASKE II, STEPHEN B Name: Address: 1306 W KENNEDY BLVD Address: City-St-Zip: City-St-Zip: TAMPA, FL 336061849

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARY L SCHRECK ACCT 01/26/2006