

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 02, 2003 8:00 am
Secretary of State

0075445 AV

DOCUMENT # P01000059828

1. Entity Name
SOUTH AMERICAN TOBACCO IMPORT COMPANY



Principal Place of Business
**300 S PINE ISLAND ROAD STE 258
PLANTATION FL 33324**

Mailing Address
**300 S PINE ISLAND ROAD STE 258
PLANTATION FL 33324**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Same

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1114403**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HECKER, ARNOLD J
300 S PINE ISLAND ROAD STE 258
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HECKER, ARNOLD J 300 S PINE ISLAND ROAD STE 258 PLANTATION FL 33324 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GOTTLIEB, MITCHELL G 300 S PINE ISLAND ROAD STE 258 PLANTATION FL 33324 | <input checked="" type="checkbox"/> Delete |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Hecker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director/Pres. 8/29/03.

Date

Daytime Phone #

CR2E034 (4/03)

954-473-0016

Attachment
ARNOLD J. HECKER
Attorney at Law
300 S. Pine Island Road
Suite 258
Plantation, Florida 33324
Telephone Number. 954-473-0016

80143255
#PO1 000059828

August 29, 2003

Uniform Business report
Division of Corporations
PO Box 1500
Tallahassee, Florida 32302-1500

Re: South American Tobacco Import Company

Dear Sir/Ms:

I hereby certify as Director & Officer of South American Tobacco Import Company that this Corporation did not receive prior notice of the Uniform Business report.

Kindly accept my check for \$150 enclosed to cover the required filing fee and waive any late charges.

A duly executed VBR is enclosed.

Thank you for your kind consideration in this matter.

Respectfully submitted,

Arnold Hecker

Arnold Hecker