

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000070878

Entity Name: CIGARS & CIGAR TUBES ONLY, INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

11020 PEMBROKE RD., #180
MIRAMAR, FL 33025

New Principal Place of Business:

11020 PEMBROKE RD.
180
MIRAMAR, FL 33025

Current Mailing Address:

11020 PEMBROKE RD., #180
MIRAMAR, FL 33025

New Mailing Address:

11020 PEMBROKE RD.
180
MIRAMAR, FL 33025

FEI Number: 59-3730562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, ROSA E
10955 SW 15TH ST., #205
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

LEON, ROSA E
16132 NW 14 COURT
PEMBROKE PINES, FL 33028 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: /ROSA E. LEON/

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEON, ROSA E
Address: 10955 SW 15TH STREET #205
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEON, ROSA E
Address: 10955 SW 15TH STREET #205
City-St-Zip: PEMBROKE PINES, FL 33025

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: /ROSA E. LEON/

P

04/18/2005

Electronic Signature of Signing Officer or Director

Date