2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003741

Entity Name: CHARLES TOBACCO CORPORATION

FILED Feb 11, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

16300 NE 19TH AVENUE 20725 NE 16TH AVENUE

SUITE 246 UNIT A17

NORTH MIAMI BEACH, FL 33162 NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

5220 S UNIVERSITY DR SUITE C-102 DAVIE, FL 33328

FEI Number: 60-0001979 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:

SILVA'S ENTERPRISE, INC. 5220 S UNIVERSITY DR SUITE C-102 DAVIE, FL 33328 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS () Delete Title: PDS (X) Change () Addition

Name: CORTES, LEONARDO Name: CORTES, LEONARDO

 Address:
 16300 NE 19TH AVENUE STE 246
 Address:
 20725 NE 16TH AVENUE UNIT A17

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162
 City-St-Zip:
 NORTH MIAMI BEACH, FL 33179

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: HERSKOWICH, KAREN Name: HERSKOWICH, KAREN

Address: 16300 NE 19TH AVENUE STE 246 Address: 20725 NE 16TH AVENUE UNIT A17 City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: NORTH MIAMI BEACH, FL 33179

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 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: LEONARDO CORTES PDS 02/11/2008