

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2004 8:00 am
Secretary of State

06-22-2004 90002 008 ***150.00

DOCUMENT # P02000018956

1. Entity Name
JOE'S CIGARS, INC.



Principal Place of Business
**9202 ULMERTON RD.
LARGO, FL 33771**

Mailing Address
**9202 ULMERTON RD.
LARGO, FL 33771**

34058438



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06152004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

02-0556535

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

**DAMONTE, JONATHAN JAMES
12110 SEMINOLE BLVD.
LARGO, FL 33778**

7. Name and Address of New Registered Agent

Name **Josef Palatzky**
Street Address (P.O. Box Number is Not Acceptable)

9202 Ulmerton Road

City **Largo**

FL

Zip Code **33771**

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

(Josef Palatzky)

6/18/04

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
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **PALATZKY, JOSEF**
STREET ADDRESS **9202 ULMERTON RD.**
CITY-ST-ZIP **LARGO, FL 33771**

TITLE **D** ☐ Delete
NAME **PALATZKY, GERLINDE**
STREET ADDRESS **9202 ULMERTON RD.**
CITY-ST-ZIP **LARGO, FL 33771**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

(Josef Palatzky)

6/18/04

727-518-7557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date


Daytime Phone #

Attachment

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

2/26/2003-90165-045-\$150.00-\$150.00

UNIFORM
AV

DOCUMENT # 1. Entity Name JOE'S CIGARS, INC.	P02000018956 
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Principal Place of Business 9202 ULMERTON RD. LARGO FL 33771	Mailing Address 9202 ULMERTON RD. LARGO FL 33771
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574058438


2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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☐ CHECK HERE IF MAKING CHANGES

City & State	City & State
Zip	Country

4. FEI Number 02-0556535	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DAMONTE, JONATHAN JAMES 12110 SEMINOLE BLVD. LARGO FL 33778

7. Name and Address of New Registered Agent Name: Josef Palatzky Street Address (P.O. Box Number is Not Acceptable) 9202 Ulmerton Road City: Largo FL Zip Code: 33771
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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: (Josef Palatzky) DATE: 5/28/04
Signatures of officers and directors of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$350.00
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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALATZKY, JOSEF 9202 ULMERTON RD. LARGO FL 33771 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALATZKY, GERLINDE 9202 ULMERTON RD. LARGO FL 33771 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

We did not get
a Report for
2004
4/30/04

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 officers empowered.

SIGNATURE: SIGNATURE REQUIRED DATE: 2/23/03 DAYTIME PHONE: 727-518-7557
Signature of the person who prepared the report or signed officer or director

4/30/04

CPRE034 (10/02)

Attachment

54058438
#P02000018956

JOE'S CIGARS

9202 Ulmerton Road
Largo, FL. 33771
Phone: (727) 518-7557

June 18, 2004

Florida Department of State
Division of Corporations
Att.: Tyrone Scott
2670 Executive Center Circle, Suite 100
Tallahassee, FL 32301

Re: Corporation Report 2004

Dear Mr. Scott;

enclosed find the original Corporations Report for 2004 and a check over \$ 150.00.

First we did not receive a Annual Report for 2004, so we used the annual report from 2003.

(Copy enclosed)

We made a copy of it and this report was already signed, this is the reason , you did not get a original.

In this report I forgot to sign the new agent. I am sorry for this.

We signed it and returned the report within 30 days (on May 28, 2004) to avoid any late fees.

(Date on your first letter is May 19, 2004, Date on Envelope is May 26, 2004. Enclosed is a copy)

In your letter from June 15, 2004 you wrote, we have to pay a late fee of \$ 400.00. This is not right, because we were not late after your first letter.

You mailed a new report this time, we filled it up and signed it.

We hope, all differences are now clear and you will accept the report and our check over \$ 150.00.

Very truly yours,



(Josef Palatzky)



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 19, 2004

JOE'S CIGARS, INC.
9202 ULMERTON RD.
LARGO, FL 33771

SUBJECT: JOE'S CIGARS, INC.
Ref. Number: P02000018956

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The new registered agent must sign accepting the designation.

The signature(s) on the report must be original and in ink. A photocopy or stamped signature is not acceptable.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

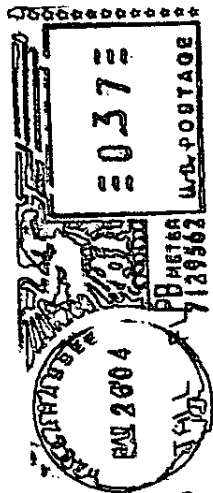
Tyrone Scott
Document Specialist

Letter Number: 404A00035087

Attachment

54058438

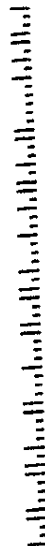
P02000018956



05/26/04 16:30



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314



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