

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061109

FILED
Sep 02, 2004
Secretary of State

Entity Name: THE PERFECT CIGAR INCORPORATED

Current Principal Place of Business:

7403 COARSEY DRIVE
TAMPA, FL 33604 US

New Principal Place of Business:

1709 N 16 TH ST
TAMPA, FL 33605 US

Current Mailing Address:

7403 COARSEY DRIVE
TAMPA, FL 33604 US

New Mailing Address:

7403 N COARSEY DRIVE
TAMPA, FL 33604 US

FEI Number: 16-1615896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAMIREZ, ABRAHAM
6295 GULF BLVD
SUITE #1
ST. PETERSBURG, FL 33706

Name and Address of New Registered Agent:

RAMIREZ, ABRAHAM
7403 N COARSEY DRIVE
TAMPA, FL 33604 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: AR

09/02/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMIREZ, ROBERTO
Address: 7403 COARSEY DRIVE
City-St-Zip: TAMPA, FL 33604

Title: V () Delete
Name: RAMIREZ, ABRAHAM
Address: 7403 COARSEY DRIVE
City-St-Zip: TAMPA, FL 33604

Title: ST () Delete
Name: RAMIREZ, CLARA
Address: 7403 COARSEY DRIVE
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: AR

V

09/02/2004

Electronic Signature of Signing Officer or Director

Date