2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 13, 2007 08:00 AN **DOCUMENT # P02000124624 Secretary of State** 1. Entity Name THE TOBACCO SHOP, INC. Principal Place of Business Mailing Address 859 EAST 41 STREET 859 EAST 41 STREET HIALEAH, FL 33013 HIALEAH, FL 33013 No Chg-P CR2E034 (11/05) 06052007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1661260 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MEZA, JORGE E 859 E. 41 STREET DO-NOT WRITE HIALEAH, FL 33013 IN THIS SPACE 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 famillar 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 \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Due by September 14, 2007 Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE MEZA, JORGE NAME U00000766222 06/13/07-80001-019 150.00 STREET ADDRESS 859 E. 41 STREET CITY-ST-ZIP HIALEAH, FL 33013 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7/P TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 attachme

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

345-953-9910