

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018952

Entity Name: TOBACCO FOR LESS, INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

822-01 SHENANDOAH SQ A-120  
13644 STATE RD 84  
DAVIE, FL 33325

## New Principal Place of Business:

822-01 SHENANDOAH SQ A-120  
13644 WEST STATE RD 84  
DAVIE, FL 33325

## Current Mailing Address:

606 WILLOW BEND RD  
WESTON, FL 33327

## New Mailing Address:

FEI Number: 11-3678169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKALLI-FETTACHI, HICHAM  
606 WILLOW BEND RD  
WESTON, FL 33327 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: SKALLI-FETTACHI, HICHAM  
Address: 606 WILLOW BEND RD  
City-St-Zip: WESTON, FL 33327

Title: VP ( ) Delete  
Name: SILVA MEDINA, LILIANA  
Address: 606 WILLOW BEND RD  
City-St-Zip: WESTON, FL 33327

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: HICHAM SKALLI

P

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date