

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051777

FILED
Jan 20, 2009
Secretary of State

Entity Name: TABACALERA SABOR HAVANA, INC.

Current Principal Place of Business:

2309 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2600 N.W. 87TH AVENUE
SUITE 3
MIAMI, FL 33172

New Mailing Address:

FEI Number: 20-1608991 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDES, JORGE L
2600 NW 87TH AVE
SUITE # 3
MIAMI, FL 33172 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: PTD () Delete
Name: VALDES, JORGE L
Address: 11987 SW 81ST LANE
City-St-Zip: MIAMI, FL 33183

Title: VPSD () Delete
Name: LEGRA, JR., AGUILES
Address: 2600 NW 87TH AVE
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPSD (X) Change () Addition
Name: LEGRA, JR., AGUILES
Address: 2600 NW 87TH AVE
City-St-Zip: MIAMI, FL 33172

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: JORGE LUIS VALDES

PD

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date