

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000093421

**FILED**  
**Jan 17, 2007**  
**Secretary of State**

**Entity Name:** UNITED TOBACCO DISTRIBUTORS, INC

**Current Principal Place of Business:**

4622 N HIATUS ROAD  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

4622 N HIATUS ROAD  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:** 20-0178169

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ESPINOSA, ORESTE  
4622 N HIATUS ROAD  
SUNRISE, FL 33351 US

**Name and Address of New Registered Agent:**

EDUARDO, ORTEGA  
4622 N HIATUS ROAD  
SUNRISE, FL 33351 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: EDUARDO ORTEGA

01/17/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ESPINOSA, ORESTE  
Address: 13170 SW 29TH STREET  
City-St-Zip: MIRAMAR, FL 33027

Title: VP ( ) Delete  
Name: ORTEGA, EDUARDO R VP  
Address: 3360 PINE WALK DRIVE N #1323  
City-St-Zip: MARGATE, FL 33063

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: ORTEGA, EDUARDO PRES  
Address: 3360 PINE WALK DRIVE N #1323  
City-St-Zip: MARGATE, FL 33063

Title: SEC (X) Change ( ) Addition  
Name: ORTEGA, EDUARDO SEC  
Address: 3360 PINE WALK DRIVE N #1323  
City-St-Zip: MARGATE, FL 33063

Title: TREA ( ) Change (X) Addition  
Name: ORTEGA, EDUARDO TREA  
Address: 3360 PINE WALK DRIVE N #1323  
City-St-Zip: MARGATE, FL 33063

Title: DIR ( ) Change (X) Addition  
Name: ORTEGA, EDUARDO DIR  
Address: 3360 PINE WALK DRIVE N #1323  
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the 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: EDUARDO ORTEGA

PRES

01/17/2007

Electronic Signature of Signing Officer or Director

Date