

2006 REINSTATEMENT FOR PROFIT CORPORATION

APPROVED
AND
FILED

192

DOCUMENT # P04000081838		06 MAY 25 AM 8:20	
1. Entity Name NORTH FLORIDA TOBACCO DISTRIBUTOR, INC.		 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 7225 NW 25TH ST. Suite, Apt. #, etc. SUITE #300 City & State MIAMI FL Zip 33122 Country USA		3. Mailing Address SAME Suite, Apt. #, etc. City & State Zip Country	
		4. FEI Number ☒ Applied For Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE		7. Name and Address of Current Registered Agent	
		Name KESTUTIS BERTASIVUS	
		Street Address (P.O. Box Number is Not Acceptable)	
		7225 NW 25TH ST SUITE #300 City MIAMI FL Zip Code 33122	
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 familiar with, and accept the obligations of registered agent.			
SIGNATURE: <i>[Signature]</i> KESTUTIS BERTASIVUS		400075553334 05/31/06--01022--014 04**600.00 DATE	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		B. Election Campaign Financing ☐ \$5.00 May Be Added to Fees Trust Fund Contribution	
10. OFFICERS AND DIRECTORS			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	P KESTUTIS BERTASIVUS	7225 NW 25TH ST SUITE #300	MIAMI FL 33122
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i> KESTUTIS BERTASIVUS		04-14-06	

CFR2034B (12/02)

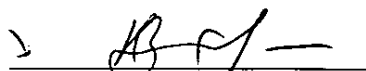
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Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Per instructions from the Division of Corporations, I am attaching a check, in the amount of \$300.00 for the annual report fee with my application.

We did not receive the U.B.R. for the years 2005-2006 or any other notice from the Division of Corporations in respect with the Corporation **NORTH FLORIDA TOBACCO DISTRIBUTOR, INC.**

Thank you for your courtesy in this matter.



KESTUTIS BERTASIUS
PRESIDENT