2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# P04000123736

Entity Name: SACS CIGARS DISTRIBUTOR, INC.

Current Principal Place of Business:

508 MENDOZA AVE
CORAL GABLES, FL 33134 US

New Principal Place of Business:

8860 JOHNSON STREET
PEMBROKE PINES, FL 33024 US

Current Mailing Address:

508 MENDOZA AVE
CORAL GABLES, FL 33134 US

New Mailing Address:

8860 JOHNSON STREET
PEMBROKE PINES, FL 33024 US

FEI Number: 20-1545755 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICHAR, JENELYS
508 MENDOZA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

NICHAR, JENELYS
8860 JOHNSON STREET
PEMBROKE PINES, FL 33024 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: JENELYS NICHAR 04/27/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NICHAR, JENELYS
Address: 508 MENDOZA AVE
City-St-Zip: CORAL GABLES, FL 33134 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: NICHAR, JENELYS
Address: 8860 JOHNSON STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VP ( ) Change (X) Addition
Name: NICHAR, NAIM
Address: 8860 JOHNSON STREET
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JENELYS NICHAR P 04/27/2005
Electronic Signature of Signing Officer or Director Date