

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000066192

Entity Name: RONIN CIGARS, INC.

FILED
Mar 13, 2008
Secretary of State

Current Principal Place of Business:

2430 VANDERBILT BCH RD #108-254
NAPLES, FL 34109

New Principal Place of Business:

4910 TAMiami TRAIL N., STE
#114
NAPLES, FL 34103

Current Mailing Address:

2430 VANDERBILT BCH RD #108-254
NAPLES, FL 34109

New Mailing Address:

4910 TAMiami TRAIL N., STE
#114
NAPLES, FL 34103

FEI Number: 20-2681902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANE, F. SCOTT
2430 VANDERBILT BCH RD #108-254
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

HANE, F. SCOTT
4910 TAMiami TRAIL N.
#114
NAPLES, FL 34103 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: F. SCOTT HANE

03/13/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HANE, F. SCOTT
Address: 2430 VANDERBILT BCH RD #108-254
City-St-Zip: NAPLES, FL 34109

Title: V (X) Delete
Name: HANE, PAMELA P
Address: 2430 VANDERBILT BCH RD #108-254
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HANE, F. SCOTT
Address: 4910 TAMiami TRAIL N., STE# 114
City-St-Zip: NAPLES, FL 34103 US

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: F. SCOTT HANE

P

03/13/2008

Electronic Signature of Signing Officer or Director

Date