

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000086411

Entity Name: CIGAR BAR INC.

FILED
Mar 14, 2008
Secretary of State

Current Principal Place of Business:

6304 PATELLA AVE
NW PORT RICHEY, FL 34653

New Principal Place of Business:

9764 LITTLE ROAD
NEW PORT RICHEY, FL 34654

Current Mailing Address:

6304 PATELLA AVE
NW PORT RICHEY, FL 34653

New Mailing Address:

9764 LITTLE ROAD
NEW PORT RICHEY, FL 34654

FEI Number: 56-2595307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVE. NORTH
ROYAL PALM BEACH, FL 334110000 US

Name and Address of New Registered Agent:

JAMESON, JESSICA O PRES
9764 LITTLE ROAD
NEW PORT RICHEY, FL FLORIDA 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: JESSICA O JAMESON

03/14/2008

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: PD () Delete
Name: MCPHAIL, JESSICA
Address: 6304 PATELLA AVE
City-St-Zip: NW PORT RICHEY, FL 34653

Title: VSD () Delete
Name: MCPHAIL, JOSEPH
Address: 6304 PATELLA AVE
City-St-Zip: NW PORT RICHEY, FL 34653

Title: TD (X) Delete
Name: COLLINS, WALT
Address: 6939 COPPERFIELD DR
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCPHAIL, JESSICA O PRES
Address: 9764 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: VP (X) Change () Addition
Name: COLLINS, WALTER L VP
Address: 9764 LITTLE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654 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: WALTER L. COLLINS

VP

03/14/2008

Electronic Signature of Signing Officer or Director

Date