2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000005362

Title:

Name:

Address:

City-St-Zip:

Entity Name: MOBILE CIGAR LOUNGE COMPANY

() Delete

10255 WATERSIDE OAKS DRIVE

NECKER, SHAWNA C

TAMPA, FL 33647

FILED Jan 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1906 N. ARMENIA AVE. 19046 BRUCE B. DOWNS BLVD. SUITE 211 # 221 TAMPA, FL 33607 TAMPA, FL 33647 **Current Mailing Address: New Mailing Address:** 1906 N. ARMENIA AVE. 19046 BRUCE B. DOWNS BLVD. SUITE 211 # 221 TAMPA, FL 33607 TAMPA, FL 33647 FEI Number: 20-8209411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NECKAR, STAN 10255 WÁTERSIDE OAKS DRIVE TAMPA, FL 33647 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFOV () Delete Title: () Change () Addition Name: NECKAR, STAN Name: 10255 WATERSIDE OAKS DRIVE Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: COOV () Delete Title: coov (X) Change () Addition ANDREYCHUK, DAVE ANDREYCHUK, DAVE Name: Name: 17810 ARBOR GREEN DRIVE LONGWATER RUN DR. Address: Address: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SHAWNA NECKAR ST 01/22/2008

(X) Change () Addition

NECKAR, SHAWNA C

TAMPA, FL 33647

10255 WATERSIDE OAKS DRIVE