2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000014169

Entity Name: FINAL SMOKE, INC.

FILED Sep 15, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

5001 W. OAKLAND PAK BLVD. 19 OLD MAMARONECK RD.

SUITE H-209 # 1-LB

LAUDERDALE LAKES, FL 33313 WHITE PLAINS, NY 10605

Current Mailing Address: New Mailing Address:

5001 W. OAKLAND PAK BLVD. 19 OLD MAMARONECK RD. SUITE H-209 # 1-LB

LAUDERDALE LAKES, FL 33313 WHITE PLAINS, NY 10605

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET

CORPORATION SERVICE COMPANY
4809 AVENUE N

TALLAHASSEE, FL 32301 US SUITE 410
BROOKLYN, FL 11234 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: JERRY GLICK 09/15/2009

Electronic Signature of Registered Agent Date

Title:

PRFS

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: D () Delete

Name:GLICK, JERRYName:GLICK, JERRYAddress:5001 W OAKLAND PARK BLVD #H209Address:19 OLD MAMARONECK RD., # 1-LB

City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip: WHITE PLAINS, NY 10605

Title: D (X) Delete Title: () Change () Addition

 Name:
 MARKOWITZ, SCOTT
 Name:

 Address:
 88 GETZ AVENUE
 Address:

 City-St-Zip:
 STATEN ISLAND, NY 10312
 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: JERRY GLICK PRES 09/15/2009