

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000033913

Entity Name: S & W SMOKE SHOP, INC.

FILED
Feb 23, 2009
Secretary of State

Current Principal Place of Business:

2320 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

2320 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 US

New Mailing Address:

3980 ALIBI TERRACE
NORTH PORT, FL 34286 US

FEI Number: 26-2313355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMSHARIE, SAM
2320 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

NOLAN, WILLIAM
3890 ALIBI TERRACE
NORTH PORT, FL 34286 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: WILLIAM NOLAN

02/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAMSHARIE, SAM
Address: 2320 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: VD () Delete
Name: NOLAN, WILLIAM
Address: 2320 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33962 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAMSHARIE, SAM
Address: 26029 CONSTANTINE ROAD
City-St-Zip: PORT CHARLOTTE, FL 33983 US

Title: VD (X) Change () Addition
Name: NOLAN, WILLIAM
Address: 3890 ALIBI TERRACE
City-St-Zip: NORTH PORT, FL 34286 US

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: WILLIAM NOLAN

VP

02/23/2009

Electronic Signature of Signing Officer or Director

Date