

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000076445

FILED
Mar 24, 2009
Secretary of State

Entity Name: AMERICAN CARIBBEAN CIGARS INC

Current Principal Place of Business:

3411 SW 90 AVE
MIAMI, FL 33165

New Principal Place of Business:

4369 SW 75 AVENUE
MIAMI, FL 33155

Current Mailing Address:

3411 SW 90 AVE
MIAMI, FL 33165

New Mailing Address:

FEI Number: 26-3200611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESA, HECTOR
3411 SW 90 AVE
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

MESA, HECTOR
4369 SW 75 AVENUE
MIAMI, FL 33155 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: HECTOR MESA

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MESA, HECTOR
Address: 3411 SW 90 AVE
City-St-Zip: MIAMI, FL 33165

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MESA, HECTOR
Address: 4369 SW 75 AVE
City-St-Zip: MIAMI, FL 33155

Title: VP () Change (X) Addition
Name: TAPANES, DAMIAN
Address: 4369 SW 75 AVE
City-St-Zip: MIAMI, FL 33155

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: HECTOR MESA

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date