

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000097285

FILED  
Mar 15, 2011  
Secretary of State

**Entity Name:** HANDROLLED CIGARS BY MARRERO INC.

**Current Principal Place of Business:**

10904 SAKONNET RIVER DR.  
APT.#104  
TAMPA, FL 33615

**New Principal Place of Business:**

8202 OLIVEWOOD PL  
TAMPA, FL 33615 US

**Current Mailing Address:**

10904 SAKONNET RIVER DR.  
APT.#104  
TAMPA, FL 33615

**New Mailing Address:**

8202 OLIVEWOOD PL  
TAMPA, FL 33615 US

**FEI Number:** 90-0528222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARRERO, UBALDO  
10904 SAKONNET RIVER DR.  
APT.#104  
TAMPA, FL 33615 US

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

MARRERO, UBALDO  
8202 OLIVEWOOD PL  
TAMPA, FL 33615 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:

03/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: MARRERO, UBALDO  
Address: 8202 OLIVEWOOD PL  
City-St-Zip: TAMPA, FL 33615 US

Title: SR.  
Name: MARRERO, UBALDO  
Address: 8202 OLIVEWOOD PL  
City-St-Zip: TAMPA, FL 33615 US

I hereby 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 all other like empowered.

SIGNATURE: UBALDO MARRERO

SR.

03/15/2011

Electronic Signature of Signing Officer or Director

Date