

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000088569

Entity Name: NO. 7 E-CIGARETTES CORP.

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7896 EASTLAKE DRIVE  
SUITE 21D  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

206 BRIDGE STREET  
CHARLEVOIX, MI 49720

**New Mailing Address:**

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:**

ARLT, LIA  
7896 EASTLAKE DR  
SUITE 21D  
BOCA RATON, FL 33433 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ARLT, LIA  
Address: 7896 EASTLAKE DR. SUITE 21D  
City-St-Zip: BOCA RATON, FL 33433

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: LIA ARLT

CEO

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date