

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26175

FILED
Apr 12, 2009
Secretary of State

Entity Name: U.S. SMOKELESS TOBACCO BRANDS INC.

Current Principal Place of Business:

6 HIGH RIDGE PARK BUILDING A
STAMFORD, CT 06905

New Principal Place of Business:

Current Mailing Address:

TAX DEPARTMENT
6 HIGHRIDGE PARK
STAMFORD, CT 06905 US

New Mailing Address:

FEI Number: 06-1277356 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PATRACUOLLA, JAMES D
Address: 5 DAER TRAIL
City-St-Zip: BOONTON TOWNSHIP, NJ 07005

Title: VP () Delete
Name: TAMARO, KEN
Address: 315 INDIAN TRAIL DRIVE
City-St-Zip: FRANKLIN LAKES, NJ 07004

Title: VPD () Delete
Name: CURRAN, ROBERT
Address: 105 BAY PORT LANE
City-St-Zip: MOORESVILLE, NC 28115

Title: P () Delete
Name: BUTLER, DANIEL
Address: 297 SUMMIT AVENUE
City-St-Zip: SUMMIT, NJ 07901

Title: VP () Delete
Name: CURAN, ROBERT, J
Address: 105 BAY PORT LANE
City-St-Zip: MOORESVILLE, NC 28115

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: KEN TAMARO

V.P.

04/12/2009

Electronic Signature of Signing Officer or Director

_____ Date