FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

 	···
1996	

DOCUMENT # P95000055243 (6)

Corporation CIGAR	Name BAR, INC.	(0	,							
Principal Place	of Business	Mailing Address				7	4 40014001 010 00101 04144 00445 064		iul uiigi uiill IIUI	
407 LINCOLN ROAD PH-SE MIAMI BEACH FL 33139 407 LINCOLN ROAD PH-SE MIAMI BEACH FL 33139										
							Date Incorporated or Qualified 07/17/1995	3a.	Date of Last F	Report
2. Principal Pla t	ce of Business	2a. Mailing Address				4.	FEI Number			Applied For
Suito, Apt. #	et/:	26 Suite, Ant. #, etc.								Not Applicable
22	, (40%)	27				5.	Certificate of Status Desired			5 Additional Required
Oty & State		City & State					Election Campaign Financing Trust Fund Contribution		\$5.0	May Be
Zio	Country	Zιρ	Cour	itry		8.	This corporation has liability for	intangit	le tax under s	199.032,
24	[25]	<u> </u>	30					5 <u>N</u>		
	9. Name and Address of Curr	ent Registered Agent		81	Name	10.	Name and Address of New I	Registe	red Agent	
CDOSS	NUMABU.		Į							
	HOWARD OLN ROAD		[82	Street Add	dress (P.0	 Box Number is Not Accepta 	ble)		
PH-SE	OUT HOAD		ŀ	83					· · · · · · · · · · · · · · · · · · ·	
	EACH FL 33139									
***************************************				84	City			ĺ	FI 85 Z	p Code
or registere	o the provisions of Sections 607.05 ad agent, or both, in the State of Fic a, and accept the obligations of, Se	or da. Such change was authoriz	ed by the c	/e÷n OrµX	amed corporation's bo	oration su bard of dir	ibnits this statement for the puectors. I hereby accept the app	irpose o pointmer	f changing its at as registered	registered office d agent. I am
SIGNATURE										
	Signature, typical or printed mainle of registered ag	enclard the it applicable (NO AND DIRECTORS	JTt: Registered	Agen	t signature requi			DA		200 11140
12.	PS OFFICE NS E	DELETE	13.	D E			ADDITIONS/CHANGES TO OF	-ICERS	Change	DRS IN 12 Addition
NAME:	GROSS, HOWARD		1 2 NA		ŀ				L. onango	
STREET ADORESS	407 LINCOLN ROAD PH-SE	<u>.</u>			ADDRESS					
CITY 51 20P	MIAMI BEACH FL 33139		1401	Y-5	T-7IP					
THE		□ DEL€ JE	2 1 TI	LE.					☐ Change	☐ Addition
NAM!			2 2 NA	ME						
STREET ASSESSES			2 3 51	REFT	ADDRESS					
Oth St ZiP			2 4 CI		T - 7IP					
TIFLE		☐ DELETE	3 1 71						☐ Change	■ Addition
NAME CONTRACTOR			3 2 NA		*D0:00500					
STRE-TADDRESS CIT ST Zir					ADDRESS					
Titl		DELETE	3 4 Cri 4 1 Ti		1- Dr		······································		Change	Addition
NAM:		F1	42 NA							
SPRETEADORESS					ADDRESS					
Clr SLZF			4401		ł					
TIL		DELETE	5 1 TI	LE					Change	☐ Addition
NAM			5.2 NA	ME						
STREET ADDRESS			5381	REFT	AUDRESS					
O(1Y - S* - 7)-*		F3 No. F.	5 4 CII		T - ZIP					
li'il		DELETE	6 1 11						Change	☐ Addition
NAME:			62 NA							
STREET ADDRESS					ADDRESS					
(13 - \$1 - 20) 14 . Toto horeby	certly that the information supplie	si with this fling is voluntarily for	64 CF hished aud a			of for the e	vemotion stated in Section 110	07/37	Florida State	tes I further
certify that oath; that I	the information indicated on this ar arn an officer or director of the co- Block 12 or Block 13 if changed, c	nnual report or supplemental and poration or the receiver o r truet s	nual report is se empower	tru	e and accu	rate and	that my signature shall have the	e same l	egal effect as	if made under

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J 1/16/96 355-534475