## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000094161 (3)

**VINCENT & TAMPA CIGAR COMPANY** 

## **FILED** May 05 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address						31,07 110. 700.	
2503 21 ST ST		P.O. BOX 5937							
TAMPA FL 33605		TAMPA FL 33675	TAMPA FL 33675			DO NOT WRITE IN THIS SPACE			
i						3. Date Incorporated or Qualified	AF AUL		
						12/12/1995			
2 Principal P	lace of Business	2a, Mailing Addre	186			4. FEI Number	<del></del>	Applied For	
21	Idob of Basilloag	26	,03			59-3352364	-	Not Applicable	
Suite, Apt	#. elc		Suite, Apt. #, etc.				69.7	5 Additional	
22		<u> </u>	27			5. Certificate of Status Desired		Required	
City & State	<del> </del>		City & State			6. Election Campaign Financing		<del></del>	
23		<del></del>	28			, , , , <u> </u>	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country			B. This corporation owes or has paid the cut			
24	25	29	30			1 ·	T Yes	□ No	
		Current Registered Agent			10. Name and Address of New Registered	_			
111	BRANO, ANDREW J			81	Name		<u> </u>		
	EAST KENNEDY BLVD.			-					
	ITE 3700 BARNETT PLAZA	1	82 Street Ad			Idress (P.O. Box Number is Not Acceptable)		- 1	
	MPA FL 33602	`		83					
ואו	MIN IL SSOUZ								
				84	City	FL	85 Z	ip Code	
44 Purcuant	to the provisions of Sections (	07 0602 and 607 1508 Florid	a Clatutes the	about	named co		obangin	a ito rogintored	
office or r	egistered agent, or both, in th	o State of Florida. Such chang	e was authoriz	ed by	the corpor	orporation submits this statement for the purpose or ation's board of directors. I hereby accept the app	ointment	as registered	
agentila	m familiar with, and accept th	e obligations of, Section 607.0	505, Florida St	alules	S.				
SIGNATURE	Signature, typed or printed name of regi-	stead ones and the dample able	(NOTE: Pagisto	and And	nt signature see	quired when reinstating) DATE			
12.		RS AND DIRECTORS	13		all signatore rec	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	OBS IN 12	
TITLE	P	DEI		TITLE		ADDITIONS OF A TOP OF THE PARTY	Chang		
NAME	GARRIDO, MARIO	_		NAME	1		_ ,	/	
STREET ADDRESS	2113 IVY STREET		•		ADDRESS			[5	
CITY-ST-ZIP	TAMPA FL 33607		and the second	CITY-S	- 1				
TITLE	VST	DE		TITLE	1-21		Chang	e Addition	
NAME	LUBRANO, JOE V.			2.2 NAME					
STREET ADDRESS	913 W. COLOMBUS DR.			2.3 STREET ADDRESS				ł	
CITY-ST-ZIP	TAMPA FL 33602	•			" I				
TITLE	IMMEN I E 00002	□ DEI		CITY-S	51-211		Chanc	ie	
NAME				NAME	Ì		Onani	jo La Addition	
STREET ADDRESS					ADDRESS			ĺ	
					- 1			1	
CITY-ST-ZIP TITLE		□ DEI		CITY-5	SI-ZIP		Chang	ne Addition	
		Uti			ļ		Chall	k - Yaqiilaii	
NAME CTOTET ADDUTES			- 1	NAME	*D00E00			1	
STREET ADDRESS					ADDRES\$				
CITY-ST-ZIP		□ DEL		CITY-S	T-ZIP		Chan	n I Addition	
TITLE			I -	TITLE			Chang	e L Addition	
NAME			• • • • • • • • • • • • • • • • • • • •	NAME					
STREET ADDRESS			1		ADDRESS			1	
CITY-ST-ZIP		The second		CITY-S	T-ZIP		1		
TITLE		[] DE(		TITLE	ļ		Chang	je 🔲 Addition	
NAME				NAME	]			į	
STREET ADDRESS			6.3	STREET	ADDRESS			j	
CITY-ST-ZIP			6.4	CITY-S	T-ZIP				
(		and the company of the second contract of the	tit to all o			E Deserve 440 07/03/35 Charlete Over 450 45 Abres 5			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

4/23/07 813-248-1511