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 # P96000000804 (0)

MULTINATIONAL TOBACCO, INC.

FILED Feb 12 1998 8:00am Secretary of State

I CRANCE O CLA MANA TANG TANG TANG GAIN GAIN GAIN BANG ARIAN CANG AGIN TAGA IRAN

Principal Place of Business		Mailing Address			* 19511921 119 19116 65111 66111 66111 66111 66111 66111 66111 66111 66111			
TWO SOUTH BISCAYNE BLVD.		TWO SOUTH BISCAYNE BLVD.						
SUITE 3580		SUITE 3580			DO NOT WRITE IN THIS CRACE			
MIAMI FL 331	31	MIAMI FL 33131	MIAMI FL 33131		DO NOT WRITE IN THIS SPACE			
1					3. Date Incorporated or Qualified			
9 Dringing D	lace of Business	L 6 Mailion Address			01/04/1996 4. FEI Number			
—	lace of Business	2a. Mailing Address			I **		pplied For	
21		26			65-0629862		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Certificate of Status Desired		Additional equired	
22		City P. City						
City & State		City & State		6. Election Campaign Financing		May Be		
23 Zip	Country	28	Countr		Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·	to Fees	
⊢	<u>├</u>	^	h	y	8. This corporation owes or has paid the		1	
24	25 9. Name and Address of Curren	29 Pagletared Apont	30		Personal Property Tax due June 30. 10. Name and Address of New Registe] No	
		it nogistorou Agorit	81	Name	10. Name and Address of New Auguste	red Agent		
	RINI, RÖNALD A		[1441110				
•	O SOUTH BISCAYNE BLVD.		82	Street Add	dress (P.O. Box Number is Not Acceptable)			
	ITE 3580		<u> </u>					
MI/A	MI FL 33131		83	<u>'</u>			į	
			84	City	······································	85 Zip	Code	
				,				
11. Pursuant i	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the above	e-named co	rporation submits this statement for the purpo- ation's board of directors. I hereby accept the	se of changing it	ts registered	
agont. La	m familiar with, and accept the obligi	ations of, Section 607.0505, F	lorida Statute	s.	anon's board of directors. Thereby accept the	appointment as	registered	
SIGNATURE								
CIG. VI COVIL	Signature, typed or preded name of togedered agr		TE Flogistered Ag	eni signature req	uired when reinstating) DA			
12.	OFFICERS AN		13.	·	ADDITIONS/CHANGES TO OFFICERS			
TITLE	D	☐ DELFTE	1.1 TITLE			☐ Change	Addition	
NAME			1,2 NAME	- 1				
STREET ADDRESS	STREET ADDRESS TWO SOUTH BISCAYNE BLVD, SUITE 3580		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	ZIP MIAMI FL 33131		1.4 CiTY-	ST-ZIP			i.	
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	T ADDRESS				
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME			J		
STREET ADDRESS				T ADDRESS			İ	
CITY-ST-ZIP			3.4 CITY-					
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NAME			4. 2 NAME	. 1				
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CITY-ST-ZIP TITLE		DELETE	4.4 CITY - 5.1 TITLE	51-ZIP		Change	Addition	
		☐ MILL				பவரு	그 사이에에	
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS			ŀ	
CITY-ST-ZIP		T Briese	5.4 CITY-1	ST-ZIP		T 05.	A diam'	
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADORESS			6.3 STREE	T ADDRESS			ļ	
CITY-ST-ZIP			6.4 CRY-					
4.4 I horoby o	artifuthat the information aunalized w	the this filing door not suphful	for the evene	stine etated is	a Caption 110 07/2)/i) Florida Statutos I furthe	or nortify that the	information	

repeat very that the information supplied with this limit does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.