

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000010079

Entity Name: PRESTIGE CIGARS, INC.

FILED
Jan 18, 2005
Secretary of State

Current Principal Place of Business:

640 N SHORE DRIVE
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

6901 W OKEECHOBEE BLVD
H15
WEST PALM BEACH, FL 33411 US

Current Mailing Address:

640 N.SHORE DRIVE
MIAMI BEACH, FL 33141

New Mailing Address:

6901 W. OKEECHOBEE BLVD
H15
WEST PALM BEACH, FL 33411

FEI Number: 65-0637777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLOTKIN, HAROLD
640 N. SHORE DRIVE
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

PLOTKIN, HAROLD
6901 W. OKEECHOBEE BLVD
WEST PALM BEACH, FL 33411 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:

01/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PLOTKIN, HAROLD
Address: 640 N.SHORE DR.
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PLOTKIN, HAROLD
Address: 6901 W. OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HAROLD PLOTKIN

PRES

01/18/2005

Electronic Signature of Signing Officer or Director

Date