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 #

P96000019013 (7)

PUROS INDIOS CIGARS, INC.

Mailing Address

FILED Jun 04 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		124(100; 110 101/4 01/11 001/1 001/1 0010; 1/4/4 (0/11 00/4; 1/4/4 (1/11 00/4; 1/4/4)			
114 N.W. 22ND AVENUE		114 N.W. 22ND AVENUE					
MIAMI FL 33125		MIAMI FL 33125		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	0.7102	
1					02/28/1996		
2. Principal Pla	ice of Business	2a, Mailing Address		·-····································	4. FEI Number	Ar.	plied For
21		26		65:0669178	 	t Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.			\$8.75	Additional	
22		27		5. Certificate of Status Desired	Fee Re	panined	
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added t	to Fees	
Zip	Country	- Z ₁ p	Country		8. This corporation owes or has paid the cu		
24 25 25 Current B		. In the contract of the contr	30		Personal Property Tax due June 30. Yes JNo 10. Name and Address of New Registered Agent		
LEYTE-VIDAL, HENRY ESQ.							
	23 CORAL WAY		82	Street Ad	ldress (P.O. Box Number is Not Acceptable)		
. MV	AMI FL 33145		83	 			
4			84	City	FL	85 Zip (Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered							
office or re-	gistered agent, or both, in the State	e of Florida. Such change was at	uthorized b	y the corpor	ration's board of directors. I hereby accept the ap	pointment as	registered
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE _	(Ignature: type-Loc pointed move of a gretere tra-	pol and title diapperable (NOTE)	Registered Ag	ent signature req	quired when reinstating) DATE		
12.		VD DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE	D	☐ DECETE	1.1 Till E			☐ Change	Addition
NAME	REYES, ZEIDA		1.2 NAME				
STREET ADDRESS	114 N.W. 22ND AVE.		1.3 STREE	1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33125		1.4 C(TY - ST - Z(P				
TITLE	SP	☐ DELET€	2.1 TITLE			Change	Addition
NAME	REYES, SEIDA		2.2 NAME				
STREET ADDRESS			2.3 STREE	1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33125		2. 4 CITY -	S1-7/P			The same
TITLE		☐ DELET e	3 1 7 11 L €			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP	DOLLETE		3.4. CITY -	ST-ZIP		Change	Addition
TITLE			4.1 TITLE	ļ		∟ urange	ריין אימונוטון
NAME			4. 2 NAME				-
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - S 5.1 TITLE	S1-ZIP		Change	Addition
i l		otten	5.2 NAME			oncode	
NAME Street address				ADDRESS			
			5.4 CITY - 5				
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	51.5lt		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			6.4 CITY-				•
14. I hereby ce	ertity that the information supplied v	with this filing does not qualify for	r the exemp	otion stated i	in Section 119.07(3)(i), Florida Statutes. I further c	ertify 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 if made under oath; that I am an officer or director of the corporation or the processor of truston employeed to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in							
officer or director of the corporation of 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 attack might with an address.							