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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700008366

IMPORT CIGARETTES AND MOORE, INC.

## FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90024 003 \*\*\*158.75

Principal Place of Business	Mailing Address	
833 B MECCA DRIVE SARASOTA FL 34243 US	833 B MECCA DRIVE SARASOTA FL 34243	DO NOT WRITE IN THIS SPACE
03		3. Date Incorporated or Qualifed 01/23/1997
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For
21 14503 Valor Cts	26 14503 Valo	or CGr. 65-0709612 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State  23 Campa, FL	City & State	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip Country 24 37613 25 U.S.I	Zip 363 30	
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent		
MOORE, THOMAS E JR 833 B MECCA DRIVE SARASOTA FL 34243		81 Name Model Tham as E. J.  82 Street Address (P.O. Box Number is Not Acceptable)  14503 Valor Gr.
		84 City dynad FL 85 Zip Code 3
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 registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renstating)		
<b>12</b> . OF	FICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE 0	☐ DELETE	1.1 TITLE Director & CEO // Change Addition
NAME THOMAS E MOORE	JR	12 NAME 12 NAME 13 STREET ADDRESS 14503 Volar Ctr. Suite 201
STREET ADDRESS 833-B MECCA DR		13 STREET ADDRESS 14303 Volar Ctr. Suite 10)
CITY-ST-ZIP SARASOTA FL 3424	3	14 CITY-ST-ZIP Tampa FV 33613

Addition Change DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE ☐ Change 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 6.1 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE

Mumay Empore A Thomas FEMORIE, Jr.

1/5/48

941-350-7974

:R2E034 (11/98)