

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000008366

1. Entity Name

IMPORT CIGARETTES AND MOORE, INC.

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90061 026 \*\*\*158.75

655325



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2105 HOWELL BRANCH RD  
#56B  
MAITLAND FL 32751  
US

2105 HOWELL BRANCH RD  
#56B  
MAITLAND FL 32751  
US

2. Principal Place of Business

14535 Bruce B. Downs Blvd

3. Mailing Address

14535 Bruce B. Downs Blvd

Suite, Apt. #, etc.

Suite 2322

Suite, Apt. #, etc.

Suite 2322

City & State

Tampa FL

City & State

Tampa FL

Zip

33620

Country

USA

Zip

33620

Country

USA

4. FEI Number

65-0709612

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, THOMAS E JR  
2105 HOWELL BRANCH RD  
APT. 56B  
MAITLAND FL 32751

Name

Thomas E. Moore, Jr.

Street Address (P.O. Box Number is Not Acceptable)

14535 Bruce B. Downs Blvd

Suite 2322

City

Tampa

FL

Zip Code

33620

8. 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 Thomas E. Moore, Jr. Thomas E. Moore Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/01

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DCEP ☐ Delete  
NAME MOORE, THOMAS E JR.  
STREET ADDRESS 2105 HOWELL BRANCH RD. #56B  
CITY-ST-ZIP MAITLAND FL 32751

TITLE DCEP ☒ Change ☐ Addition  
NAME Thomas E. Moore, Jr.  
STREET ADDRESS 14535 Bruce B. Downs Blvd Suite 2322  
CITY-ST-ZIP Tampa, FL 33620

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas E. Moore, Jr. Thomas E. Moore Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

Date

813-866-1316

Daytime Phone #

CR2E034 (10/00)