

CORPORATION
ANNUAL REPORT
2000



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
Secretary of State
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000029386
Corporation Name

OLIVA CIGAR CO.
3400 Coral Way # 600
Miami, Florida 33145-3053
Principal Place of Business Mailing Address

DO NOT WRITE IN THIS SPACE.

Date Incorporated or Qualified 4-1-97	Date of Last Report 2000
FEL Number 58-2268398	Applied For Not Applicable
Certificate of Status Desired ☐	\$8.75 Additional Fee Required
☐	\$5.00 May Be Added to Fees
This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

Principal Place of Business	2a. Mailing Address
26	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
27	27
City & State	City & State
28	28
Zip	Country
25	29
Country	30

9. Name and Address of Current Registered Agent
GINNIE OLIVA
12875 S W 119 Terrace
Miami, Fla. 33187

81 Name	10. Name and Address of New Registered Agent
82 (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code
FL	

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, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when certifying)	DATE
OFFICERS AND DIRECTORS		13. EFFECTIVE 9-1-2000	
ADDRESS	11 TITLE	PRESIDENT. Director	☐ Change ☐ Addition
ST-ZIP	12 NAME	GILBERTO F. OLIVA	
	13 STREET ADDRESS	6824 NW 77 Court	
	14 CITY-ST-ZIP	Miami, Fla. 33166	
ADDRESS	21 TITLE	VICE PRES. Director	☐ Change ☐ Addition
ST-ZIP	22 NAME	JOSE R. OLIVA	
	23 STREET ADDRESS	6824 NW 77 Court	
	24 CITY-ST-ZIP	Miami, Fla. 33166	
ADDRESS	31 TITLE	SECRETARY. Director	☐ Change ☒ Addition
ST-ZIP	32 NAME	JEANNIE D. OLIVA-SUAREZ	
	33 STREET ADDRESS	12875 SW 119 Terrace	
	34 CITY-ST-ZIP	Miami, Fla. 33187	
ADDRESS	41 TITLE		☐ Change ☐ Addition
ST-ZIP	42 NAME		
	43 STREET ADDRESS		
	44 CITY-ST-ZIP		
ADDRESS	51 TITLE		
ST-ZIP	52 NAME		
	53 STREET ADDRESS		
	54 CITY-ST-ZIP		
ADDRESS	61 TITLE		
ST-ZIP	62 NAME		
	63 STREET ADDRESS		
	64 CITY-ST-ZIP		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Gilberto F. Oliva* Gilberto F. Oliva Pres. 9-1-2000 (305)446-2055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR