

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

FILED
May 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Motham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000039860 (6)**

1. Corporation Name

J.B. CIGARS, INC.



Principal Place of Business 158-A SPARROW DRIVE ROYAL PALM BEACH FL 33411	Mailing Address 158-A SPARROW DRIVE ROYAL PALM BEACH FL 33411
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 PO 210426		2a. Mailing Address 26 PO 210426		3. Date Incorporated or Qualified 05/01/1997	
Suite, Apt. #, etc. 22 VLA		Suite, Apt. #, etc. 27 VLA		4. FEI Number 65-0767743	
City & State 23 Royal Palm Bch, FL		City & State 28 Royal Palm Beach, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 33411		Zip 29 33411		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country 25 USA		Country 30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MARSHALL, JAMES B
158-A SPARROW DRIVE
ROYAL PALM BEACH FL 33411**

10. Name and Address of New Registered Agent

81 Name MARSHALL, JAMES B
82 Street Address (P.O. Box Number is Not Acceptable) 116 VALENCIA ST
83
84 City Royal Palm Beach
85 Zip Code FL 33411

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, 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D	<input type="checkbox"/> DELETE
NAME MARSHALL, JAMES B	
STREET ADDRESS 158-A SPARROW DRIVE	
CITY-ST-ZIP ROYAL PALM BEACH FL 33411	

TITLE D	<input type="checkbox"/> DELETE
NAME WILSON, THERESA E	
STREET ADDRESS 158-A SPARROW DRIVE	
CITY-ST-ZIP ROYAL PALM BEACH FL 33411	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE MARSHALL, JAMES B	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME 116 VALENCIA ST	
1.3 STREET ADDRESS Royal Palm Bch, FL 33411	
1.4 CITY-ST-ZIP	

2.1 TITLE MARSHALL THERESA E	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME 116 VALENCIA ST	
2.3 STREET ADDRESS Royal Palm Bch, FL 33411	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 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 my appointment with an address.

SIGNATURE:

CR2E034 (10/97)