

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

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Secretary of State

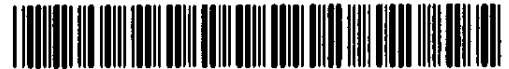
PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000053430 (9)

1. Corporation Name
DANJA CIGARS, INC.



Principal Place of Business

2515 FILLMORE STREET
HOLLYWOOD FL 33020

Mailing Address

2515 FILLMORE STREET
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 6095 N.W. 167th St

Suite, Apt. #, etc.

22 D-10

23 MIAMI, FL

Zip

24 33015

Country

25 U.S.A.

2a. Mailing Address

26 6095 N.W. 167th St.

Suite, Apt. #, etc.

27 D-10

City & State

28 MIAMI, FL

Zip

29 33015

Country

30 U.S.A.

3. Date Incorporated or Qualified

06/25/1997

4. FEI Number

65-0768348

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

LIDSKIN, DAVID S
2515 FILLMORE STREET
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name

DAVID S. LIDSKIN

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

6095 N.W. 167th St.

83 D-10

84 City

MIAMI

FL

85 Zip Code

33015

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D
NAME LIDSKIN, DAVID S
STREET ADDRESS 2515 FILLMORE STREET
CITY-ST-ZIP HOLLYWOOD FL 33020

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

D

12 NAME

LIDSKIN, DAVID S.

13 STREET ADDRESS

6095 N.W. 167th St.

14 CITY-ST-ZIP

MIAMI, FL 33014

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change

☐ Addition

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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 any attachment with an address.

SIGNATURE

CR2E034 (10/97)