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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P97000055651

1. Corporation Name

EMPEROR TOBACCO COMPANY, INC.

Principal Place of Business					
22436 SEA BASS DRIVE BOCA RATON FL 33428					

Mailing Address

FILED Apr 08, 1999 8:00 am Secretary of State 04-08-1999 90109 020 ***150.00

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22436 SEA BASS DRIVE 22436 SEA BASS DRIVE BOCA RATON FL 33428 BOCA RATON FL 33428 US US								
						3. Date Incorporated or Qualifed 06/24/1997		
2. Principal Pla	ce of Business	2a. Mailing Add	ress			4. FEI Number A	pplied For	
26					65-0765670	ot Applicable -		
Suite Apt. #_etc.		, etc.			5 Contifered of Status Desired \$8.75	3.75 Additional Fee Required		
City & State City & State 28				6. Election Campaign Financing Trust Fund Contribution Added to				
Zip	Country	Zip	Zip Country			This corporation owes the current year Intangible Personal Property Tax. Yes	□No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
RODII	CRAIG			81	Name			
22436 SEA BASS UHIVE		82	Street Address (P.O. Box Number is Not Acceptable)					
			83	33				
, .	•			84	City	FL 85 Zip	Code	
44 Dumuent to	the provisions of Sections 607	7 0502 and 607 1508 Flor	ida Statutos the a	hove	-named como	ration 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: Rec	gistered Agent signature re	equired when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS	(11012,110)	13.	ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE	DS \square	DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	BODIE, LANA J		1.2 NAME	•			
STREET ADDRESS	22436 SEA BASS DRIVE		1.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33428		14 CITY ST ZIP				
TITLE		DELETE '	2.1 TITLE			☐ Change	Addition
NAME	BODIE, CRAIG		2.2 NAME		•		
STREET ADDRESS	_22436_SEA_BASS_DRIVE		:2.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33428	•	2.4 CITY-ST-ZIP			'	
TITLE		DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4.2 NAME	•			
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4,4 CITY-ST-ZIP				
TITLE		DELETÉ	5.1 TITLÉ			Change	☐ Addition
NAME			5.2 NAME		•		
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP			****	
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				ļ
STREET ADDRESS			6.3 STREET ADDRESS				1
CITY-ST-ZIP		\ _	6.4 CITY-ST-ZIP				

or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information under exemption that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied with this filling does not qualify for the indicated on this annual report or supplemental annual report is true and accurate officer or director of the corporation or the receiver or trustee employed to execu Block 12 or Block 13 if changed, or on an attachment with an address, with the other.

561-883-6453