

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

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0045295

PROFIT CORPORATION ANNUAL REPORT 1998



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

FILED

98 AUG 18 AM 10:00

SECRETARY OF STATE



DOCUMENT # P97000059314 (9)

1. Corporation Name
 EL CANELO & INFIESTA CIGARS CORP

Principal Place of Business: **EL CANELO & INFIESTA CIGAR CORP.**
 3940 SW 61 AVENUE MIAMI FL 33155
709 NW 27TH AVENUE MIAMI, FL 33125
PH (305) 641-6315

391 8th ST. S.E.
 Naples, FL 34117

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/08/1997
 4. FEI Number: 65-0769832
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business:
 21. 709 NW 27th Ave
 Suite, Apt. #, etc.
 23. Miami, FL 33125
 City & State
 24. 33125 Zip
 25. Dade County

2a. Mailing Address:
 26. 391 8th St S E F 34117
 Suite, Apt. #, etc.
 28. Naples, FL
 City & State
 29. 34117 Zip
 30. Collier County

9. Name and Address of Current Registered Agent
~~RODRIGUEZ, ORLANDO~~
 3840 SW 61 AVENUE MIAMI FL 33155
 Elba Rodriguez
 709 NW 27th Ave
 Miami, FL 33125

10. Name and Address of New Registered Agent
 81. Name: Elba Rodriguez
 82. Street Address (P.O. Box Number is Not Acceptable): 709 NW 27th Ave
 83. City: Miami, FL
 84. City: Miami, FL
 85. Zip Code: 33125

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: *Elba Rodriguez*
 Signature, typed or printed name of registered agent and title, if applicable. DATE: 7/16/98

12. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	RODRIGUEZ, ORLANDO	
STREET ADDRESS	3840 SW 61 AVENUE	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	DVT	<input checked="" type="checkbox"/> DELETE
NAME	RODRIGUEZ, ELBA	
STREET ADDRESS	3840 SW 61 AVENUE	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	RODRIGUEZ, MADELINE	
STREET ADDRESS	3840 SW 61 AVENUE	
CITY-ST-ZIP	MIAMI FL 33155	
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	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Elba Rodriguez	
1.3 STREET ADDRESS	709 NW 27th Ave	
1.4 CITY-ST-ZIP	miami, fl 33125	
2.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Madeline Rodriguez	
2.3 STREET ADDRESS	709 NW 27th Ave	
2.4 CITY-ST-ZIP	miami, fl 33125	
3.1 TITLE	Sec. + Treasre	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Laura Toledo	
3.3 STREET ADDRESS	709 NW 27th Ave	
3.4 CITY-ST-ZIP	miami, fl 33125	
4.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	100002621381-8	
4.4 CITY-ST-ZIP	08/20/98-01084-015	
5.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	***150.00	
5.4 CITY-ST-ZIP	***150.00	
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)(l), 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: *Madeline Rodriguez* 7/16/98 (305) 641-6315

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EL CANELO & INFIESTA CIGARS CORP.

August 11, 1998

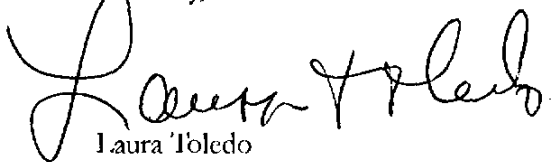
Division of Corporation
PO Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Due to the death of Mr. Orlando Rodriguez on July 9th 1997 we find ourselves involved in the family business involuntarily. Due to our lack of knowledge and experience involved in this business there have been issues not properly conducted. We had no knowledge that the Annual Report we filled was late when we mailed it. On the coupon book we have it said the due date was September 30th and we mailed it on July. When I get the papers back from you stating that the FBI number was missing, I called your office. While speaking with your representative, I was informed that the due date was not September but it was May 1st. I had no idea at this point that the original filling fee was supposed to be \$150.00. The representative advised me to write explaining the circumstances.

Please accept my apology in this matter and accept my filling fee of \$150.00 that I am enclosing in this letter. If this is not possible please let me know on time to what I need to do.

Sincerely,



Laura Toledo
Secretary and Treasurer