

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2004 8:00 am**  
**Secretary of State**

02-12-2004 90021 004 \*\*\*158.75

**DOCUMENT # P97000063512**

1. Entity Name

HAVANA'S CIGAR CAFE/HAVANA'S LIMITED, INC.



Principal Place of Business

301 LA PALOMA LANE  
TITUSVILLE FL 32780

Mailing Address

4505 ELLOIT AVE.  
TITUSVILLE FL 32780

2. Principal Place of Business

4420 Coquina Ave

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Titusville, FL

City & State

Titusville, FL

Zip

32780

Country

USA

Zip

32780

Country

USA

4. FEI Number

59-3463870

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WEBBER, MARK S  
301 LA PALOMA LANE  
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

Name

Mark S. Webber

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

4420 Coquina Ave

City

Titusville

FL

Zip Code

32780

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Mark S. Webber* 2/6/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PS ☐ Delete

NAME WEBBER, MARK S  
STREET ADDRESS 301 LA PALOMA LANE  
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE VPD ☐ Delete

NAME WEBBER, BRUCE A  
STREET ADDRESS 868 MEDFORD CIRCLE  
CITY-ST-ZIP SCHAUMBURG IL 60193

TITLE S ☐ Delete

NAME WEBBER, MARK S  
STREET ADDRESS 301 LAPALOMA LN  
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☒ Delete

NAME WEBBER, MARIA C  
STREET ADDRESS 4505 ELLIOT AVE  
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☒ Delete

NAME WEBBER, RICHARD K  
STREET ADDRESS 4505 ELLIOT AVE  
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☐ Delete

NAME WEBBER, JEFFERY K  
STREET ADDRESS 1770 WINDOVER OAKS CIR  
CITY-ST-ZIP TITUSVILLE FL 32780

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PS ☒ Change ☐ Addition

NAME Mark Webber  
STREET ADDRESS 4420 Coquina Ave  
CITY-ST-ZIP Titusville FL 32780

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☒ Change ☐ Addition

NAME Mark S. Webber  
STREET ADDRESS 4420 Coquina Ave  
CITY-ST-ZIP Titusville, FL 32780

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition

NAME Jeffery K Webber  
STREET ADDRESS 1685 Harrison St Apt 155  
CITY-ST-ZIP Titusville, FL 32780

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mark S. Webber* Mark S. Webber 2/6/04 321-267-0513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #