

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90307 028 ***158.75

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1. Entity Name

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



Principal Place of Business

4420 COQUINA AVE
TITUSVILLE FL 32780

Mailing Address

4505 ELLOIT AVE.
TITUSVILLE FL 32780

2. Principal Place of Business

Suite, Apt. #, etc.

N/A

3. Mailing Address

4420 Coquina Av.

Suite, Apt. #, etc.

N/A

City & State

N/A

City & State

Titusville, FL

Zip

Country

Zip

32780

Country

USA

1st MOORE

CR2E034 (10/04)

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
4420 COQUINA AVE
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

N/A

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, 2005 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 4420 COQUINA AVE
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 4420 COQUINA AVE
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☐ Delete
NAME WEBBER, JEFFERY K
STREET ADDRESS 1685 HARRISON ST APT 155
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

3/23/05

321-267-0513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #