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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000066808 (1)

ED'S SMOKERS EMPORIUM, INC.

FILED Feb 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
4181 NW 66TH PLACE COCONUT CREEK FL 33073			4181 NW 66TH PLACE COCONUT CREEK FL 33073			DO NOT WOLTE IN THE	o on tor	
						DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SSPACE	
						08/01/1997		
2. Principal P	lace of Business Sunhise (2a, Mailing	Address			4. FEI Number	Applied For	
21 12 80	11 West Sunhise t	3√6				65-0771644	Not Applicable	
Suite, Apt.	#, etc.	Suito, Ar	it. #, etc			5. Certificate of Status Desired	\$8.75 Additional	
27 City & State				· · · · · · · · · · · · · · · · · · ·			Fee Required	
City & State 23 Sunnse, A 28 City & State 28						6. Election Campaign Financing 1rust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country Zip 28 28 29 29			Country 30		,	8. This corporation owes or has paid the c		
24 533	25 25 Name and Address of Curre	29 29 And And		0		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No	
	UEVAS, ANDREW ESQ	THE PROPERTY OF THE PROPERTY O		81	Name	10. Table and realisable of float flogistics	a regoint	
0000 C DADELAND DIVID CUITE 000					C+(6-	(D.O. Boy Namboy is blot Associable)		
MIAMI FL 33156				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
i				83				
				84	City		85 Zip Code	
					,	F.	L '	
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 require order		F arow		nd sognature rec	qued whomenstating) DATE	ID DIDECTORS III 46	
12.	DPVS OF FICERS AF	ND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	Change Addition	
NAME	ARBOLEDA, EDDIE O	L		1.2 NAME			El ollarge El radición	
STREET ADDRESS	4181 NW 66TH PLACE			1.3 STREET	Anneess		3	
CITY-ST-ZIP	COCONUT CREEK FL 330	73		1.4 OHY-S				
TITLE	1		DELETE	21 THE			Change Addition	
NAME	ARBOLEDA, EDDIE O			2.2 NAME				
STREET ADDRESS	4181 NW 66TH PLACE			2.3 STREET	ADDRESS			
CITY-ST-ZIP	COCONUT CREEK FL 330			2. 4 CITY - 5	S1 · Z(P			
TITLE		Ĺ	_] DELETE	3.1 TALE			☐ Change ☐ Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP			DELETE	3.4. CITY - S	31 - 7/P		Chance Addition	
TITLE		L.	ן טנגנוב	4.1 TITLE			Change Addition	
NAME OTOTET ADDOCCO				4. 2 NAML	*DD0100			
STREET ADDRESS CITY-ST-ZIP				4.3 STREET 4.4 CITY-S				
TITLE			DELETE	51 IIICF	1 - 21		Change Addition	
NAME				52 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY - S				
TITLE		<u></u>	DELETE	6.1 TITLE			Change Addition	
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY-ST-ZIP				6 4 C(1) Y - S	1- ZIP			
14. Thereby o	ertify that the information supplied v	with this filing does	not qualify for t	he exemp	tion stated	in Section 119.07(3)(i). Florida Statutes, Lifurther of	ertily 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 of 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 changer, or on an attachment with an address.