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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthem

Secretary of State > DIVISION OF CORPORATIONS

FILED May 19 1998 8:00am Secretary of State

DOCUMENT # P97000068229 (8) REEL SMOKERS, INC. Principal Place of Business Mailing Address 20590 WEST DIXIE HIGHWAY 20590 WEST DIXIE HIGHWAY NORTH MIAMI BEACH FL 33180-1129 NORTH MIAMI BEACH FL 33180-1129 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/06/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 56 Suite, Apt. #, etc. Suite Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Zip Country Country This corporation owes or has paid the current year Intangible 24 59 Personal Property Tax due June 30. 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HORLAND, JAMES A 290 N.W. 165TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **PENTHQUSE 4 - CITICENTRE** 83 **MIAMI FL 33169** 84 City 85 Zip Code 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 registered agent and title if applicable (NOTE: Registered Agent signature required when rematating) CRZE034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change SANCHEZ, CARLOS NAME 1.2 NAME 20590 WEST DIXIE HIGHWAY STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI BEACH FL 33180-1129 CITY-ST-ZIP 1.4 CITY - ST - 2IP DELETE Change Addition TITI F 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE ■ Addition TITLE 4.1 TITLE 4 2 NAME -05/21/98--01092--046 STREET ADDRESS 4.3 STREET ADDRESS ***150.00 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this ennual report or supplemental about report is used to 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 for the re-level of the level of

SIGNATURE~

4-15-98

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