


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

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Mar 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000082204 (3) 1. Corporation Name WORLD'S BEST RATED CIGAR COMPANY			
Principal Place of Business 3941 N.E. 163RD STREET NORTH MIAMI BEACH FL 33160		Mailing Address 3941 N.E. 163RD STREET NORTH MIAMI BEACH FL 33160	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent LEWIS, HAROLD L TWO SOUTH BISCAYNE BLVD. STE. 3660 ONE BISCAYNE TOWER MIAMI FL 33131		10. Name and Address of New Registered Agent 81 Name Lloyd Lyons 82 Street Address (P.O. Box Number is Not Acceptable) 3941 NE 163rd Street 83 84 City No. Miami Beach, FL 85 Zip Code 33160	
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 <i>[Signature]</i> Lloyd Lyons / Pres DATE Feb. 27, 1998 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP [] DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP [] DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP [] DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP [] DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP [] DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE President 1.2 NAME Lloyd Lyons 1.3 STREET ADDRESS 3941 NE 163rd Street 1.4 CITY - ST - ZIP No. Miami Beach, FL 33160 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 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)(i), 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.			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/23/1997	
4. FEI Number 65-0787109	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

SIGNATURE: *[Signature]* **Lloyd Lyons / Pres**

Feb 27, 1998 305/945-9300

CR2E034 (1097)