4-24.98 B 5529 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 # P97000085116 (6)

VLASS' CIGAR PUB, INC.

FILED Apr 24 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				1848 SILEH KIBER HEUR BEH 1481
· .		•				
739 PINETRE	:E UHIVE BOR BEACH FL 32937	739 PINETREE DRI INDIAN HARBOR E		7		
, applications,	poir benon re sess.	THE WATER THAT I STATE OF THE	CHOIIC BEGS	•	DO NOT WRITE IN TH	IS SPACE
ļ					3: Date Incorporated or Qualified	
				···	10/01/1997	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21 Suite Ant # etc		26		_	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		1		
23		28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z(p)	Coi	intry	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curre		1331	[10. Name and Address of New Registers	od Agent
.10	HNSON, WILLIAM A			81 Name		
6767 NORTH WICKHAM ROAD SUITE 400F				62 Street Add	ress (P.O. Box Number is Not Acceptable)	
				02 Sileer Auc	iless (F.O. BOX Northber is Not Acceptable)	
MELBOURNE FL 32940				83	****	
				84 City		Int Code
				84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida	Statutes, the a	bove-named cor	poration submits this statement for the purpose	of changing its registered
office or i	registered agont, or both, in the Stat im familiar with, and accept the oblid	e of Florida. Such change gations of, Section 607.056	was authorize 35. Florida Sta	d by the corpora tutes:	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE						ļ
	Signature, typed or printed name of registered as		(NOTE Registere	d Agent signature requ		
12.	,	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	STD	☐ DELET				Change Addition
NAME	VLASS, MICHAEL D	44 DD	1.2 N	1		
STREET ADDRESS	1240 YACHT CLUB BOULEV		1	TREET ADORESS		
CITY-ST-ZIP	INDIAN HARBOR BEACH FL	. 32937		ITY-ST-ZIP		Change Addition
TITLE	V 400 1104 D	L DELF		I		Charide Charge
NAME	VLASS, LISA D	(ADD	2.2 N			
STREET ADDRESS	1240 YACHT CLUB BOULEY INDIAN HARBOR BEACH FL			TREET ADORESS		
CITY+ST-ZIP TITLE	VD	, 32837		CITY - ST - ZIP		Change
NAME	VLASS, STEPHEN G	L DELET	32 N	4		ET SHOULD ET PROHIDIT
	149 OCEAN BREEZE CIRCL	E				İ
STREET ADDRESS	INDIALANTIC FL 32903	C.		TREET ADDRESS		ļ
CITY-ST-ZIP TITLE	D D D	DELET		RTY-ST-ZIP		Change Addition
NAME	VLASS, NANCY J	_ 2000	4.11			
STREET ADORESS	149 OCEAN BREEZE CIRCL	E		TREET ADDRESS		
	INDIALANTIC FL 32903	L	1	ITY-ST-ZIP		
CITY+ST-ZIP TITLE	V	DELET				Change Addition
NAME	VLASS, DEMETRI G	, ,	5.2 N			
STREET ADDRESS	277 MARION STREET			TREET ADDRESS		
CITY-ST-ZIP	INDIAN HARBOR BEACH FL	32937	1	ITY-ST-ZIP		
TITLE		DELET				Change Addition
NAME			6.2 N			
STREET ADDRESS				REET ADDRESS		
TITY-ST-ZIP				TY-ST-ZIP		
-11 OI L-			3.70	.,		

I hereby certify that the information supplied with this filling 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 occupancy 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 for a state ment with an address

4-15-98 407-777-9460