

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000099545

1. Entity Name
TOBACCO MART INC.

Principal Place of Business
2319 W. 52ND STREET
HIALEAH FL 33016

Mailing Address
2319 W. 52ND STREET
HIALEAH FL 33016

2. Principal Place of Business
3994 W 12 AVE
Suite, Apt. #, etc.
City & State
Hialeah, FL
Zip 33012 Country M-DADE
3. Mailing Address
3994 W 12 AVE
Suite, Apt. #, etc.
City & State
Hialeah, FL
Zip 33012 Country Miami, Dade

4. FEI Number
65-0797353
Applied For
Not Applicable
5. Certificate of Status Desired
\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent
WASSIM HATOUR
737 NE 195 ST
MIAMI FL 33179

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) **FILE NOW!!! FEE IS \$550.00**
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HATOUR, WASSIM 8328 DUN DEE TERR. MIAMI LAKES FL 33016	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Hataour, Wassim 8328 DUN DEE TERR. MIAMI, FL 33179
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *W. H. Hataour* NATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90015 020 ***150.00

RECEIVED



DO NOT WRITE IN THIS SPACE

5018

CR2E034 (5/01)

7-17-01 705-827-5996

Daytime Phone #

Attachment

A0079331

107000099545

Tobacco Mart, Inc.
3994 W 12th Avenue
Hialeah, Florida 33012

July 17, 2001

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

Just received the 2001 UNIFORM BUSINESS REPORT. I did not receive the first one. Therefore, we are enclosing a check for \$150 per Tom in your department.

Thank you for your understanding in this matter.

Sincerely,



Wassim Hatoum.