2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000101071  1. Entity Name CIGCO IMPORT/EXPORT, CORP.							FILE:19 05 FEB 16 PM 12: 37				
Principal Place	of Busines:	s	Mailing Address								
15364 SW 34 MIAMI, FL 33			15364 SW 34 STREET Miami, FL 33185				DATORETARY OF STAIL TALLAHASSEE, FLORIDA				
2. Principal Pl	ace of Busin	ness	3. Mailing Address								
Suite, Apt. (	#, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-P	CR2E03	4 (10/03)		
City & State			City & State							plied For Applicable	
Zip		Country	Zip	Coun	itry	5. Certificate	of Status Desired	_	8.75 Add ee Required	tional	
	6. Name	and Address of Curre	ent Registered Agent		Name	7. Name and	Address of New I	Registered A	gent		
LECARO, I	-										
15364 SW MIAMI, FL		ET	_	Street Addre			s (P.O. Box Number is Not Acceptable)				
			$\bigcap$								
		. /			City			FL	Zip Code	•	
SIGNATURE_		Affect	9. Election Camp	aign Fina		inited when reinstating)  55.00 May Be added to Fees		DATE			
10.			ND DIRECTORS	11.		ADDITIONS/	CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
TITLE NAME	PTSD	, MANUEL A	☐ Delete	TITL NAM	_ / / /	JOAQUIN	/ BAF	CBA	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP		V 34 STREET		STR	EET ADORESS //	5364 51	N345	8 3185			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		E		<b>30004</b> 25/05010		□ Change □ 73 **15	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					-	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	•				., , , , , , , , , , , , , , , , , , ,	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		li li				Change	Addition	
12 I hereby (	certify that the on this reportion or it, or on an att	ne information supplied ort or supplemental repo the receiver or trustee e tachment with an addre	with this filing does not qualify to ort is due and accurate and that imposses to execute this repo as with all other like empowere	or the eve	emption stated in	he same legal effec 607, Florida Statute	ct as if made under es; and that my nar	oath; that I a ne appears ir	m an officer n Block 10 oi	or director Block 11 if	
SIGNAT	URE:		Texeur				2-15-05 Date	34	75 22	<u>7170</u> 6	
·	· —	SIGNATURE AND TYPED	OF PRINTED NAME OF SIGNING OFFICE	R OR DIREC	TOR		Date	D	sytime Phone #	4	