

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000108336

FILED
Jan 22, 2004
Secretary of State

Entity Name: A. FUENTE CIGARS USA, INC.

Current Principal Place of Business:

4910 ANDROS DR
TAMPA, FL 33629

New Principal Place of Business:

1310 N. 22ND ST
TAMPA, FL 33605 US

Current Mailing Address:

4910 ANDROS DR
TAMPA, FL 33629

New Mailing Address:

P.O. BOX 5360
TAMPA, FL 33675 US

FEI Number: 59-3618701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, KAREN R
4830 W KENNEDY BLVD, SUITE 630
TAMPA, FL 336092574 US

Name and Address of New Registered Agent:

SMITH, KAREN R ESQ.
4890 W KENNEDY BLVD, SUITE 900
TAMPA, FL 336091850 US

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: KAREN R. SMITH

01/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SUAREZ, CYNTHIA F
Address: 4910 ANDROS DR
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SUAREZ, CYNTHIA F
Address: 4910 ANDROS DR
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA F. SUAREZ

P

01/22/2004

Electronic Signature of Signing Officer or Director

Date