

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90049 032 ***150.00

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04112007 Chg-P CR2E034 (12/06)

4. FEI Number **59-3036870** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHARP, WILLIAM M SR.
4890 W KENNEDY BLVD
STE 900
TAMPA, FL 33609-1850

7. Name and Address of New Registered Agent

Name **KAREN R. SMITH**
Street Address (P.O. Box Number is Not Acceptable)
1310 N. 22ND STREET
City **TAMPA** FL Zip Code **33605**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Karen R. Smith* DATE **4-12-07**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **FUENTE, CARLOS P**
STREET ADDRESS **10 EDGEWATER DRIVE, UNIT 10D, TOWER II**
CITY-ST-ZIP **CORAL GABLES, FL 33133**

TITLE **D** ☐ Delete
NAME **FUENTE, CARLOS A**
STREET ADDRESS **2714 W. WOODLAWN AVE.**
CITY-ST-ZIP **TAMPA, FL 33607**

TITLE **DP** ☐ Delete
NAME **NEWMAN, ERIC M**
STREET ADDRESS **2701 16TH STREET**
CITY-ST-ZIP **TAMPA, FL**

TITLE **DV** ☐ Delete
NAME **NEWMAN, ROBERT C**
STREET ADDRESS **2701 16TH STREET**
CITY-ST-ZIP **TAMPA, FL**

TITLE **D** ☒ Delete
NAME **NEWMAN, STANFORD J**
STREET ADDRESS **2701 16TH STREET**
CITY-ST-ZIP **TAMPA, FL**

TITLE **DVS** ☐ Delete
NAME **SUAREZ, CYNTHIA F**
STREET ADDRESS **4910 ANDROS DR.**
CITY-ST-ZIP **TAMPA, FL 33629**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition

NAME **D ANDREW M. NEWMAN**
STREET ADDRESS **2701 16TH STREET**
CITY-ST-ZIP **TAMPA FL 33605**

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carlos P. Fuente*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-11-07

Date

813-242-4541

Daytime Phone #

ATTACHMENT
40073603

Fuente & Newman Premium Cigars Limited, Inc.

Document #S09129

2007 for Profit Corporation Annual Report

Attachment

10. Officers and Directors:

D
J. Wayne Suarez
4910 Andros Drive
Tampa, FL 33629