

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S09129

FILED
Apr 27, 2009
Secretary of State

Entity Name: FUENTE & NEWMAN PREMIUM CIGARS LIMITED, INC.

Current Principal Place of Business:

2701 NORTH 16TH STREET
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 76219
TAMPA, FL 33605

New Mailing Address:

FEI Number: 59-3036870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, KAREN R
1310 N. 22ND STREET
TAMPA, FL 33605 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FUENTE, CARLOS P
Address: 10 EDGEWATER DRIVE, UNIT 10D, TOWER II
City-St-Zip: CORAL GABLES, FL 33133

Title: D () Delete
Name: FUENTE, CARLOS A
Address: 2714 W. WOODLAWN AVE.
City-St-Zip: TAMPA, FL 33607

Title: DP () Delete
Name: NEWMAN, ERIC M
Address: 2701 16TH STREET
City-St-Zip: TAMPA, FL

Title: DV () Delete
Name: NEWMAN, ROBERT C
Address: 2701 16TH STREET
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: NEWMAN, ANDREW M
Address: 2701 16TH STREET
City-St-Zip: TAMPA, FL 33605

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ERIC NEWMAN

DP

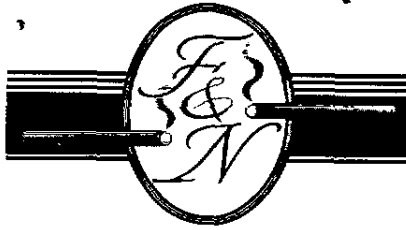
04/27/2009

Electronic Signature of Signing Officer or Director

Date

S09129 fld 4/27/09

P.O. Box 76219
Tampa, Florida 33605, USA



1 (800) 237-7215
(813) 248-2124
Fax (813) 247-2135

**Fuente & Newman
Premium Cigars Limited, Inc.**

April 27, 2009

Department of State
Attn: Annual Reports
P.O. Box 6327
Tallahassee, FL 32314

Please include the following Officers and Directors to the Fuente & Newman Premium Cigars Limited, Inc. Annual Report.

Fuente & Newman Premium Cigars Limited, Inc.
Document #S09129
2008 for Profit Corporation Annual Report

Attachment

10. Officers and Directors:

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