

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000097989

**Entity Name:** TOBACCO AUTHORITY, INC.

**Current Principal Place of Business:**

10845 SW 36 ST  
MIAMI, FL 33165

**Current Mailing Address:**

PO BOX 650914  
MIAMI, FL 33265 US

**FEI Number:** 65-1048889

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ENDEMANO, HUGO C  
10845 SW 36 ST  
MIAMI, FL 33165 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                   |                 |                 |
|-----------------|-------------------|-----------------|-----------------|
| Title           | P                 | Title           | P.              |
| Name            | ENDEMANO, ROMAY A | Name            | PORTAL, MARIA F |
| Address         | 10845 SW 36 ST    | Address         | 10845 SW 36 ST  |
| City-State-Zip: | MIAMI FL 33165    | City-State-Zip: | MIAMI FL 33165  |
|                 |                   |                 |                 |
| Title           | VP, SECRETARY     |                 |                 |
| Name            | ENDEMANO, HUGO C  |                 |                 |
| Address         | 10845 SW 36 ST    |                 |                 |
| City-State-Zip: | MIAMI FL 33165    |                 |                 |

*I hereby 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 all other like empowered.*

**SIGNATURE:** HUGO C ENDEMANO

VP

04/03/2024

Electronic Signature of Signing Officer/Director Detail

Date