

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000023365

Entity Name: BLUE SMOKE CIGARS, INC.

Current Principal Place of Business:

369 SW 192 AVE
PEMBROKE PINES, FL 33029

Current Mailing Address:

369 SW 192 AVE
PEMBROKE PINES, FL 33029

FEI Number: 45-5416360

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EATON, MORTON
369 SW 192 AVE
PEMBROKE PINES, FL 33029 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 PD
Name EATON, MORTON
Address 369 SW 192 AVE
City-State-Zip: PEMBROKE PINES FL 33029

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: MORTON K EATON

PD

04/23/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date