

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S09129

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

Current Principal Place of Business:

2701 NORTH 16TH STREET
TAMPA, FL 33605

Current Mailing Address:

P.O. BOX 76219
TAMPA, FL 33605

FEI Number: 59-3036870

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, KAREN R
1310 N. 22ND STREET
TAMPA, FL 33605 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 D
Name FUENTE, CARLOS P
Address 10 EDGEWATER DRIVE, UNIT 10D,
TOWER II
City-State-Zip: CORAL GABLES FL 33133

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

Title DP
Name NEWMAN, ERIC M
Address 2701 16TH STREET
City-State-Zip: TAMPA FL

Title DV
Name NEWMAN, ROBERT C
Address 2701 16TH STREET
City-State-Zip: TAMPA FL

Title D
Name NEWMAN, ANDREW M
Address 2701 16TH STREET
City-State-Zip: TAMPA FL 33605

Title DVS
Name SUAREZ, CYNTHIA F
Address 29 SPANISH MAIN
City-State-Zip: TAMPA FL 33609

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: ERIC NEWMAN

DIRECTOR

04/16/2015

Electronic Signature of Signing Officer/Director Detail

Date