# SIGNATURE: ROBERT NEUGEBAUER

that my name appears above, or on an attachment with all other like empowered.

33635 City-State-Zip

Authorized	uthorized Person(s) Detail :				
Title	PRESIDENT	Title	VP		
Name	NEUGEBAUER, ROBERT	Name	NEUGEBAUER, FRANCINE		
Address	11212 CLAYRIDGE DR	Address	11212 CLAYRIDGE DR.		
City-State-Zip:	TAMPA FL 33635	City-State-Zip:	TAMPA FL 33635		

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL	<u>REPORT</u>

DOCUMENT# L13000168076

Entity Name: CIGAR CITY FASTENERS LLC

# **Current Principal Place of Business:**

5008 W. LINEBAUGH AVE SUITE 54 TAMPA, FL 33624

#### **Current Mailing Address:**

PO BOX 274187 TAMPA, FL 33688 US

## FEI Number: 46-4233013

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

BELL, BRADLEY 201 E. KENNEDY BLVD 850 TAMPA, FL 33602 US

SIGNATURE:

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.

Electronic Signature of Signing Authorized Person(s) Detail

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

PRESIDENT

FILED Jan 27, 2020 Secretary of State 1594409075CC

Certificate of Status Desired: No

01/27/2020

Date