## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005952

Entity Name: ALTADIS U.S.A. INC.

**Current Principal Place of Business:** 

5900 NORTH ANDREWS AVENUE

**SUITE 1100** 

FT. LAUDERDALE, FL 33390

**Current Mailing Address:** 

5900 NORTH ANDREWS AVENUE

**SUITE 1100** 

FT. LAUDERDALE, FL 33390 US

FEI Number: 59-3472656 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Name

Name

Electronic Signature of Registered Agent

Date

**FILED** Apr 28, 2014

**Secretary of State** 

CC4688655049

Officer/Director Detail:

PRESIDENT, DIRECTOR Title Title GENERAL COUNSEL & SECRETARY,

DIRECTOR

FREUDENTHAL, KEVIN Name WILKEY, ROB Address 5900 NORTH ANDREWS AVENUE

Address 5900 NORTH ANDREWS AVENUE City-State-Zip: FORT LAUDERDALE FL 33309

FORT LAUDERDALE FL 33309 City-State-Zip:

CONTROLLER, VICE PRESIDENT

Title **VICE PRESIDENT - TAX** Title **CFO** 

GEBHARD, ROGER Name MCKAY, ROB Name

Address 5900 NORTH ANDREWS AVENUE 5900 NORTH ANDREWS AVENUE Address

City-State-Zip: FORT LAUDERDALE FL 33309 City-State-Zip: FORT LAUDERDALE FL 33309

Title CONTROLLER - TAMPA DIVISION, VP Title

Name MAY, RORY Name SOLIDAY, RAYMOND

Address 5900 NORTH ANDREWS AVENUE Address 5900 NORTH ANDREWS AVENUE

City-State-Zip: FORT LAUDERDALE FL 33309 City-State-Zip: FORT LAUDERDALE FL 33309

Title **DIRECTOR** VICE PRESIDENT - HUMAN Title

**RESOURCES** DOMINGUEZ, FERNANDO

Name PROLA, MASSIMO Address 5900 NORTH ANDREWS AVENUE

Address 5900 NORTH ANDREWS AVENUE FORT LAUDERDALE FL 33309 City-State-Zip:

> City-State-Zip: FORT LAUDERDALE FL 33309

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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.

04/28/2014 SIGNATURE: ROB WILKEY SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VICE PRESIDENT - SUPPLY CHAIN Title VP

Name GREER , DUANE Name ESTADES , JAVIER

Address 5900 NORTH ANDREWS AVENUE Address 5900 NORTH ANDREWS AVENUE

City-State-Zip: FORT LAUDERDALE FL 33309 City-State-Zip: FORT LAUDERDALE FL 33309