2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State
03-06-2001 90010 022 ***158.75

DOCUMENT # F97000005952

1. Entity Name

ALTADIS U.S.A. INC.

Principal Place of Business	Mailing Address
3901 RIGA BLVD. TAMPA FL 33601	PO BOX 1428 MANGO FL 33550

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	5900 N. ANDREWS AVE. Suite, Apt. #, etc.
City & State	City & State FT. LAUDERDALE FL
Zip / Country	Zip 33309-2369 / Country

4. FEI Number 59-3472656 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C ARTHUR, THOMAS D 3901 RIGA BLVD. TAMPA FL 33601	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P;CEO;D THEO W. FOLZ 936 INTERCOASTAL DRIVE Ft. LAUDERDALE, FL 33034	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORGAN, W. TOMMY III 3901 RIGA BLVD. TAMPA FL 33601	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sr.VP;CFO;D GARY R. ELLIS 12588 CLASSIC DRIVE CORAL SPRINGS, FL 33071	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STRAUSS, PETER 3901 RIGA BLVD. TAMPA FL 33601	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP;CORPORATE CONTROLLER JAMES PARNOFIELLO 1350 PARKSIDE CIRCLE BOCA RATON, FL 33486	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCEO BRIDGES, E. BARTON 3901 RIGA BLVD. TAMPA FL 33601	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S;D BERGE SETRAKIAN 191 CEDAR STREET ENGLEWOOD, NJ 07631	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCFO FREEMAN, JEFF E 3901 RIGA BLVD. TAMPA FL 33601	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gary R. Ellis _____ 02/28/01 (954) 938-7830
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #