2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 26, 2007 08:00 A Secretary of State DOCUMENT # H42448 1. Entity Name CANDY PROPERTIES AND INVESTMENTS, INC. Principal Place of Business Mailing Address C/O JOSEPH F. WILLIAMS, JR. 31 S MAIN STREET C/O JOSEPH F. WILLIAMS, JR. 31 S MAIN STREET WINTER GARDEN FL 34787 WINTER GARDEN FL 34787 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-2492963 Not Applicable Zip Country Zip Country \$8.75 Additional Cortificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo WILLIAMS, JOSEPH F., JR. 31 S MAIN STREET Street Address (P.O. Box Number is Not Acceptable) WINTER GARDEN FL 34787 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 Fiorida. I am familiar with, and accept the obligations of registered agent, SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ШЕ Defete THEE Change ☐ Addition WILLIAMS, JOSEPH F., JR. NAME 31 S MAIN STREET STRUET ADDRESS STREET ADORESS WINTER GARDEN FL CDY-SI-ZP CITY-ST-ZIP TITLE ☐ Delete 11111 Change ☐ Addition NAMI STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-ST-ZIP 11000000649058 - 🗀 Daiote me . NAMÉ. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP DILLE Delete ☐ Change Addition NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HITE Delete amr Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP City-st-zip TITLE Change Delete TITLE Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHY+ST-ZIP

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Joseph F.W. Clinis Par 2/5/0) 407-656-6420 SIGNATURE:

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutos I further certify that the information