2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L07000070542

Entity Name: ICANDI PRODUCTS, LLC

Current Principal Place of Business:

820 S. OCEAN BLVD
MANALAPAN, FL 33462

New Principal Place of Business:

900 LINTON BLVD., SUITE 203
DELRAY BEACH, FL 33444

Current Mailing Address:

PO BOX 3858
LANTANA, FL 33465

New Mailing Address:

900 LINTON BLVD., SUITE 203
DELRAY BEACH, FL 33444

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWIDERSKI, DIYNA
820 S. OCEAN BLVD
MANALAPAN, FL 33462 US

Name and Address of New Registered Agent:

SWIDERSKI, DIYNA
900 LINTON BLVD
SUITE 203
DELRAY BEACH, FL 33444 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: 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SMOLEV, IRA
Address: 820 S. OCEAN BLVD
City-St-Zip: MANALAPAN, FL 33462

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SMOLEV, IRA
Address: 900 LINTON BLVD SUITE 203
City-St-Zip: DELRAY BEACH, FL 33444

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: IRA SMOLEV MGR 04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date