

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # L86380

1. Entity Name

A CANDIE'S PRODUCTIONS, INC.



Principal Place of Business

6916 W. UNIVERSITY AVE.
GAINESVILLE, FL 32607 US

Mailing Address

6916 WEST UNIVERSITY AVE.
GAINESVILLE, FL 32607 US

DO NOT WRITE IN THIS SPACE



04112007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3021043

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KURLAND, ELISSA R
727 NORTHEAST THIRD AVENUE
SUITE 201
FORT LAUDERDALE, FL 33304

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KAPLAN, SANDER K.
STREET ADDRESS	6916 WEST UNIVERSITY AVE.
CITY-ST-ZIP	GAINESVILLE, FL 32607

TITLE	
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**DO NOT WRITE
IN THIS SPACE**

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04/25/07-80065-021 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sander K Kaplan SANDER K KAPLAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/07
Date

352 332-4334
Daytime Phone #