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FILED
Jul 11, 2002 8:00 am
Secretary of State
05-28-2002 91558 001 ***300.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000016260

1. Entity Name
THE CANDY FACTORY, INC.

DO NOT WRITE IN THIS SPACE

97077

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7962 RIDGEWOOD DR.	7962 RIDGEWOOD DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LAKE WORTH, FLORIDA	City & State: LAKE WORTH, FLORIDA
Zip: 33467 Country: PALM BEACH	Zip: 33467 Country: PALM BEACH

4. FEI Number 65-0982343 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: William Adams

Street Address (P.O. Box Number is Not Acceptable): 1308 Pine Borough Lane

City: Palm Beach Gardens FL Zip Code: 33418

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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT, DIRECTOR PATRICIA WILLIAMS 7962 RIDGEWOOD DR LAKE WORTH, FLORIDA 33467
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE Patricia Williams PATRICIA WILLIAMS, PRESIDENT 4/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #