


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 11, 2003 8:00 am
Secretary of State

7/31

07-31-2003 90074 012 ***150.00

DOCUMENT #	P02000035295
1. Entity Name	Kandy Inc. 

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	7101 NW 55T	3. Mailing Address	SAME
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State	Plantation FL	City & State	
Zip	33317	Country	USA

55053668

DO NOT WRITE IN THIS SPACE

4. FEI Number	04-3631705	Applied For	
		Not Applicable	
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name	JAMES T. MCGONIGLE
Street Address (P.O. Box Number is Not Acceptable)	7021 W. BROWARD BLVD ST 280
EIN	59-2167797
City	PLANTATION
State	FL
Zip Code	33317

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  DATE 7/22/03

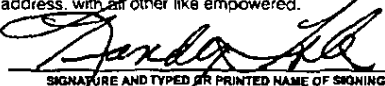
(NOTE: Registered Agent signature required when renaming)

January 1 - May 1: Fee is \$150.00 After May 1: Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE	KANDY TALE - Pres	TITLE	
NAME		NAME	
STREET ADDRESS	7101 NW 55T	STREET ADDRESS	
CITY-ST-ZIP	Plantation FL 33317	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034B (12/02)

Attachment#

55053868

KANDY, INC.

7101 NW 5th Street

Plantation, FL 33317

July 15, 2003

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Corporation Renewal
Kandy, Inc.
FEIN 04-3631705

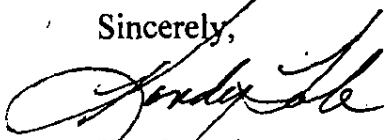
Dear Sir or Madam:

Recently while at my accountant's office having some tax work done, he wanted to confirm with me that I had renewed my Corporate License with the State. I knew there would be a yearly fee to renew, but thought it would come due on the anniversary date of the corporation date.

Apparently I was to have received a renewal notice, but to my recollection, I did not receive it. Therefore, I am enclosing my check for \$150.00 and ask that my corporation be renewed for this year. In the future, I will now know to be on the lookout for the renewal for at the beginning of the year.

Thank you for your consideration in this matter.

Sincerely,



Kandy Tole,
President of Kandy, Inc.