

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000054798

Entity Name: KANDIDANES, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

21210 GLADES CUT-OFF RD
PORT ST LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

21210 GLADES CUT-OFF RD
PORT ST LUCIE, FL 34987

New Mailing Address:

FEI Number: 03-0467965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BESANKO, KIRSTERN
21210 GLADES CUT-OFF RD
PORT ST LUCIE, FL 34987 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MS. () Delete
Name: BESANKO, KIRSTEN A T
Address: 21210 GLADES CUT-OFF RD.
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: MS. () Delete
Name: BESANKO, KIRSTEN A PRES
Address: 21210 GLADES CUT-OFF RD.
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: MS () Delete
Name: SOFTIC-EDGEELL, BRANDI J VP
Address: 21210 GLADES CUT-OFF RD.
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: MRS. (X) Delete
Name: ZANI, RACHAEL L S
Address: 148 PLEASANT ST.
City-St-Zip: ATHOL, MA 01331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MRS. (X) Change () Addition
Name: ZANI, RACHAEL L VP/S
Address: 148 PLEASANT ST.
City-St-Zip: ATHOL, MA 01331

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIRSTEN A. BESANKO

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04/26/2005

Electronic Signature of Signing Officer or Director

Date