

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2007 8:00 am**  
**Secretary of State**

03-29-2007 90015 014 \*\*\*150.00

**DOCUMENT # P02000120580**

1. Entity Name  
CANDY KING OF AMERICA, INC.



Principal Place of Business  
437 NW 97TH AVE.  
PLANATATION, FL 33324

Mailing Address  
437 NW 97TH AVE.  
PLANATATION, FL 33324

40044000



2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

03092007 Chg-P CR2E034 (12/06)

City & State  
Zip Country

4. FEI Number  
16-1638062  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ATOR, JENNIFER J ESQ.  
150 WEST FLAGLER STREET, SUITE 2850  
MIAMI, FL 33130

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 *Jennifer J Ator* 3/9/07  
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRES  
GLADSTONE, STANLEY  
7090 PETERS ROAD, BUILDING C-100  
PLANTATION, FL 33324

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Stanley Gladstone  
437 NW 97th AVE  
Plantation, Florida 33324  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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☐ Change ☐ Addition

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☐ Change ☐ Addition

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: *Stanley Gladstone, President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/07  
Date Daytime Phone #