2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# P03000024403

Entity Name: CANDY'S ENTERPRIZES INC.

Current Principal Place of Business:

722 NW 127 AVE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

722 NW 127TH AVE
CORAL SPRINGS, FL 33071 US

New Mailing Address:

11114 ROSEATE DR
TAMPA, FL 33626 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: P ( ) Delete
Name: HARVEY, CANDIDA
Address: 722 NW 127 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: V ( ) Delete
Name: HARVEY, CANDIDA
Address: 722 NW 127 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S ( ) Delete
Name: HARVEY, CANDIDA
Address: 722 NW 127 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T ( ) Delete
Name: HARVEY, CANDIDA
Address: 722 NW 127 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D ( ) Delete
Name: HARVEY, CANDIDA
Address: 722 NW 127 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CANDIDA HARVEY P 03/18/2009

Electronic Signature of Signing Officer or Director Date