

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000057162

FILED
Oct 19, 2004
Secretary of State

Entity Name: CANDE'S OF CAPE CORAL, INC.

Current Principal Place of Business:

1602 SE 12TH TERRACE
CAPE CORAL, FL

New Principal Place of Business:

1602 SE 12TH TERRACE
CAPE CORAL, FL 33990

Current Mailing Address:

1602 SE 12TH TERRACE
CAPE CORAL, FL

New Mailing Address:

FEI Number: 35-2206496 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARCHOL, MARTHA S
1633 S.E. 47TH TERRACE
CAPE CORAL, FL 33904 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: CANDIANO, JOHN J
Address: 5215 SW 23RD AVENUE
City-St-Zip: CAPE CORAL, FL 33914

Title: VTD () Delete
Name: CANDIANO, SHARON
Address: 5215 SW 23RD AVENUE
City-St-Zip: CAPE CORAL, FL 33914

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC () Change (X) Addition
Name: NEWBORN, DEBRA
Address: 2313SW52ND STREET
City-St-Zip: CAPE CORAL, FL 33914

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: JOHN CANDIANO

PSD

10/19/2004

Electronic Signature of Signing Officer or Director

Date