

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000032865

FILED
Dec 02, 2008
Secretary of State**Entity Name:** ELECTRIC CANDYLAND, INC.**Current Principal Place of Business:**2155 N.E. 54TH STREET
FORT LAUDERDALE, FL 33308 US**New Principal Place of Business:****Current Mailing Address:**2155 N.E. 54TH STREET
FORT LAUDERDALE, FL 33308 US**New Mailing Address:****FEI Number:** 27-0118404 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GOODMAN, DONALD
2155 N.E. 54TH STREET
FORT LAUDERDALE, FL 33308 US**Name and Address of New Registered Agent:**GOODMAN, DONALD
2155 N.E. 54TH STREET
FORT LAUDERDALE, FL 33308 US

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

12/02/2008

Date**OFFICERS AND DIRECTORS:****Title:** PD () Delete
Name: GOODMAN, DONALD
Address: 2155 NE 54TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33308 US**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** V () Change (X) Addition
Name: GOODMAN, ALBERDINA
Address: 2155 N.E. 54TH ST
City-St-Zip: FORT LAUDERDALE, FL 33308 US

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: DONALD E. GOODMAN

PD

12/02/2008

Electronic Signature of Signing Officer or Director_____
Date