


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90093 007 ***150.00

| | | | | | |
|---|--|---------|--|---|--|
| DOCUMENT # P06000153819 | | | |  | |
| 1. Entity Name MCANDUS CORP | | | | | |
| Principal Place of Business 7339 E. COLONIAL DR., STE. 6 ORLANDO, FL 32807 | | | Mailing Address 7339 E. COLONIAL DR., STE. 6 ORLANDO, FL 32807 | | |
| 2. Principal Place of Business - No P.O. Box # | | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | | Country | | Zip | |
| Country | | Country | | City | |
| 6. Name and Address of Current Registered Agent CARDONA, TOMAS A. 7339 E. COLONIAL DR., STE. 6 ORLANDO, FL 32807 | | | | | |
| 7. Name and Address of New Registered Agent | | | | | |
| Name | | | | | |
| Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| City | | | | | |
| State 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 _____ | | | | | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) | | | | | |
| DATE | | | | | |
| FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007 | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | |
| \$5.00 May Be Added to Fees | | | 10. OFFICERS AND DIRECTORS | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE DP | | | TITLE DP | | |
| NAME CARDONA, TOMAS A. | | | NAME CARDONA, TOMAS A. | | |
| STREET ADDRESS 7339 E. COLONIAL DR., STE. 6 | | | STREET ADDRESS 7339 E. COLONIAL DR., STE. 6 | | |
| CITY-ST-ZIP ORLANDO, FL 32807 | | | CITY-ST-ZIP ORLANDO, FL 32807 | | |
| TITLE V | | | TITLE V | | |
| NAME ARGUIJO, CARLOS | | | NAME ARGUIJO, CARLOS | | |
| STREET ADDRESS 7339 E. COLONIAL DR., STE. 6 | | | STREET ADDRESS 7339 E. COLONIAL DR., STE. 6 | | |
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| 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: <i>Carlos Arguiso</i> | | | | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | | | | |
| Date 5/1/07 | | | | | |
| Daytime Phone # 401-452-9375 | | | | | |

40103340



05022007 Chg-P CR2E034 (12/06)

4. FEI Number
 01-0879440

Applied For
 Not Applicable

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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SIGNATURE:

Carlos Arguiso

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/07

Date

401-452-9375

Daytime Phone #