2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000033674

Entity Name: CANDYCANDYANDGUM INC.

FILED Feb 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4100 NORTH POWERLINE ROAD STE F1 3839 WOODFIELD DR

POMPANO BEACH, FL 33073 COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

4100 NORTH POWERLINE ROAD STE F1 PO BOX 970703

COCONUT CREEK, FL 33097 POMPANO BEACH, FL 33073

FEI Number: 22-3978162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR

15595 NW 11 CT PEMBROKE PINES, FL 33028 US MIAMI, FL 33145 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.

DAGOSTINO, PRISCILLA R PRES

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SIGNATURE: PRISCILLA R DAGOSTINO 02/03/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition

D'AGOSTINO, PRISCILLA D'AGOSTINO, PRISCILLA Name: Name: 4100 NORTH POWERLINE ROAD STE F1 15595 NW 11 CT Address: Address:

City-St-Zip: POMPANO BEACH, FL 33073 City-St-Zip: PEMBROKE PINES, FL 33028

Title: () Delete Title: VΡ (X) Change () Addition

JONES, MATT Name: JONES, LYNEA Name: 4100 NORTH POWERLINE ROAD STE F1 Address: 3839 WOODFIELD DR Address:

POMPANO BEACH, FL 33073 COCONUT CREEK, FL 33073 City-St-Zip: 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.

Ρ SIGNATURE: PRISCILLA DAGOSTINO 02/03/2009