## FILED Mar 24, 2002 8:00 am §

DOCUMENT # P9400023501  1. Entity Name CANDOIT, INC.					Secretary of State 03-24-2002 90044 004 ***150.00			
Principal Place of Business 635 S ORANGE AVE STE 10 SARASOTA FL 34236 US		Mailing Address 635 S ORANGE AVE STE 10 SARASOTA FL 34236 US			BOOT LOST			
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address 46 N. WASHINGTON BLVD. Suite, Apt. #, etc. SUITE 1		D.	DO NOT WRITE IN THIS SPACE			
City & State		City & State SARASOTA, FLORIDA			4. FEI Number 65-0512711	No	pplied For ot Applicable	
Zip 🦸	Country	34236	Country		5. Certificate of Status Desired	\$8.75 Add		
6. Name and Address of Current Registered Agent Name					7. Name and Address of New Registered Agent			
PATTERSON, JOHN				Street Address (P.O. Box Number is Not Acceptable)				
	Washington BLVD.	Cheer Address (			.o. box Northberta Not Acceptable)			
SUITE 1 SARASOTA FL 34236			City	City FL Zip Code				
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent signature required  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!! FEE IS \$150.00  After May 1, 2002 Fee will be \$550.00  Make Check Payable to Department of State					nen reinstating)  10. Election Campaign Financia Trust Fund Contribution.	DATE \$5.0	O May Be	
11.	OFFICERS AND D		12.		ADDITIONS/CHANGES TO OFFICER			
NAME STREET ADDRESS	DP PETRIK, GERD 635 S ORANGE AVE, STE 10 SARASOTA FL 34236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,P,	T ·	XX Change	Addition	
NAME STREET ADDRESS	DVPT NAKAMOTO, KERI 904 S. TAMIAMI TRAIL OSPREY FL 34229	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	635	MOTO, KERI S. ORANGE AVE. SOTA, FL 34236	<b>XX</b> Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. · Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with t	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	adia C - "	on 110 07/2\(\text{0}\) Florida (************************************	☐ Change	Addition	

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAM
KERT NAKAMOTO

2002 UNIFORM BUSINESS REPORT (UBR)

<u>364-9609</u>

Daytime Phone #