

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 08, 2007 8:00 am**  
**Secretary of State**

03-08-2007 90004 029 \*\*\*150.00

<b>DOCUMENT # P94000048388</b> 1. Entity Name CANDO CONSULTANT SERVICE, INC.					
Principal Place of Business 3773 CENTRAL AVE A798 ST PETERSBURG, FL 33713-8338			Mailing Address 3773 CENTRAL AVE A798 ST PETERSBURG, FL 33713-8338		
2. Principal Place of Business - No P.O. Box # 8950 DR MLK ST NORTH		3. Mailing Address PO BOX 55368			
Suite, Apt. #, etc. Suite #130		Suite, Apt. #, etc.			
City & State St Petersburg FL		City & State St Petersburg FL		4. FEI Number 59-3253673	
Zip 33702		Country USA		Zip 33732	
Country USA		Country USA			
6. Name and Address of Current Registered Agent  WNEBRENNER, J M 3773 CENTRAL AVE A798 ST PETERSBURG, FL 33713-8338				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) 8950 Dr Martin Luther King St North Suite #130 City St Petersburg FL Zip Code 33702	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EAVES, LELAND 201 SANTA CRUZ COURT LULING, LA 70070	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EAVES, JENNIFER 1704 GOLD DR #109 FARGO, ND 58103	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COSE, KARMA 2401- 30 1/2 AVE. S. #303 FARGO, ND 58103	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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.					
<b>SIGNATURE:</b> <u>LELAND EAVES</u> <u>3/1/07</u> <u>727/327-1202</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

40031479



01042007 Chg-P CR2E034 (12/06)

Applied For  
Not Applicable

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

Name

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

Suite #130

City

St Petersburg

FL

Zip Code  
33702

DATE

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PD  
EAVES, LELAND  
201 SANTA CRUZ COURT  
LULING, LA 70070

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

S  
EAVES, JENNIFER  
1704 GOLD DR #109  
FARGO, ND 58103

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VP  
COSE, KARMA  
2401- 30 1/2 AVE. S. #303  
FARGO, ND 58103

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12801 Lafayette St #D105  
Thornton CO 80241

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2401 -30 1/2 Ave South #202  
Fargo ND 58103

☒ Change ☐ Addition

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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