

2005 FOR PROFIT CORPORATION ANNUAL REPORT


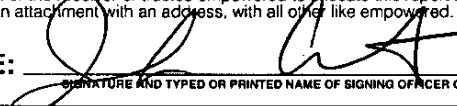
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Apr 22, 2005 8:00 am
Secretary of State

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03282005 Chg-P CR2E034 (10/03)

DOCUMENT # P95000066301					
1. Entity Name CANDITO PARTNERS TWO, INC.					
Principal Place of Business 2626 3 E TAMIAMI TR NAPLES, FL 34112			Mailing Address 2626-3 E TAMIAMI TR NAPLES, FL 34112		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0609162	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CANDITO, JOSEPH P JR 2540 11TH CIRCLE NAPLES, FL 34103			Name CANDITO, JOSEPH P, JR Street Address (P.O. Box Number is Not Acceptable) 2000 SANDPIPER ST City NAPLES FL Zip Code 34102		
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 renewing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CANDITO, JOSEPH P JR		NAME	CANDITO, JOSEPH P, JR	
STREET ADDRESS	2540 11TH CIRCLE		STREET ADDRESS	2000 SANDPIPER ST	
CITY-ST-ZIP	NAPLES, FL 33940		CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CANDITO, PATRICIA F		NAME	CANDITO, PATRICIA F	
STREET ADDRESS	2540 11TH CIRCLE		STREET ADDRESS	2000 SANDPIPER ST.	
CITY-ST-ZIP	NAPLES, FL 33940		CITY-ST-ZIP	NAPLES, FL 34102	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CANDITO, JOSEPH P SR		NAME	CANDITO, JOSEPH P, SR	
STREET ADDRESS	2540 11TH CIRCLE		STREET ADDRESS	2550 10TH STREET N	
CITY-ST-ZIP	NAPLES, FL 33940		CITY-ST-ZIP	NAPLES, FL 33940	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CANDITO, LYDIA		NAME		
STREET ADDRESS	2550 10TH STREET N.		STREET ADDRESS		
CITY-ST-ZIP	NAPLES, FL 33940		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 			Date: 3/30/05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		