

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91790 002 ***150.00

0539398
AV

DOCUMENT # P95000066301



1. Entity Name
CANDITO PARTNERS TWO, INC.

Principal Place of Business
**2540 11TH CIRCLE
NAPLES FL 33940**

Mailing Address
**2626-3 E TAMiami TR
NAPLES FL 34112**



2. Principal Place of Business
2626-3 E. Tamiami TR
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Naples FL
Zip
34112 Country
USA

City & State
Zip
Country

4. FEI Number **65-0609162**

Applied For
Not Applicable

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CANDITO, JOSEPH P JR
2540 11TH CIRCLE
NAPLES FL 34103**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

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TITLE NAME	STREET ADDRESS CITY-ST-ZIP	TITLE NAME	STREET ADDRESS CITY-ST-ZIP
D CANDITO, JOSEPH P JR	2540 11TH CIRCLE NAPLES FL 33940	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
D CANDITO, PATRICIA F	2540 11TH CIRCLE NAPLES FL 33940	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
D CANDITO, JOSEPH P SR	2540 11TH CIRCLE NAPLES FL 33940	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
D CANDITO, LYDIA	2550 10TH STREET N. NAPLES FL 33940	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
D CANDITO, JULIE	2540 11TH CIR. NAPLES FL 33940	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: *SIGNATURE REQUIRED*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

H-26-03 *239-417-8575*
Date Daytime Phone #

CR2E034 (10/02)