

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000071235 (2)

1. Corporation Name  
**NUTS ABOUT CANDY, INC.**



Principal Place of Business: 3230 CARAMBOLA CIRCLE COCONUT CREEK FL 33066  
Mailing Address: 3230 CARAMBOLA CIRCLE COCONUT CREEK FL 33066

3. Date Incorporated or Qualified: 09/12/1995  
3a. Date of Last Report: [Blank]  
4. FEI Number: 65-0618398  
Applied For: [Blank] / Not Applicable  
5. Certificate of Status Desired: [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: [ ] \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [ ] Yes [X] No

2. Principal Place of Business: 21 [Blank]  
2a. Mailing Address: 26 [Blank]  
Suite, Apt. #, etc.: 22 [Blank] / 27 [Blank]  
City & State: 23 [Blank] / 28 [Blank]  
Zip: 24 [Blank] / Country: 25 [Blank] / Zip: 29 [Blank] / Country: 30 [Blank]

9. Name and Address of Current Registered Agent  
**GIRNUN, MORRIS A**  
3230 CARAMBOLA CIRCLE  
COCONUT CREEK FL 33066

10. Name and Address of New Registered Agent  
81 Name: **JAMES PETERKIN**  
82 Street Address (P.O. Box Number is Not Acceptable): **3230 CARAMBOLA CIRCLE**  
83 [Blank]  
84 City: **COCONUT CREEK** FL 85 Zip Code: **33066**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.1505, Florida Statutes.

SIGNATURE: *James Girnun*  
Date: 4/19/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2. NAME	<b>P 3 JAMES PETERKIN</b>
STREET ADDRESS		3. STREET ADDRESS	<b>3230 CARAMBOLA CIRCLE</b>
CITY-ST-ZIP		4. CITY-ST-ZIP	<b>COCONUT CREEK FL 33066</b>
TITLE	<input type="checkbox"/> DELETE	2. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	<b>V T MARILYN PETERKIN</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>3230 CARAMBOLA CIRCLE</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>COCONUT CREEK FL 33066</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	<b>200001895582</b>
STREET ADDRESS		5.3 STREET ADDRESS	<b>-07/16/96--01184--011</b>
CITY-ST-ZIP		5.4 CITY-ST-ZIP	<b>***25.00</b>
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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

Date: 4/19/96

CR2E034 (12/95)