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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000017624

1. Corporation Name

CANDYLAND CHILDREN WEAR & PHOTO STUDIO, INC.

Principal Place	e of Business	Mailing Address	Mailing Address				
3188 W. 70TH TERRACE HIALEAH FL 33016		3188 W. 70TH TERRACE HIALEAH FL 33016					
					DO NOT WRITE IN THIS	3 SPACE	
	The second secon	and the second of the second o		د ه پ	3. Date Incorporated or Qualifed		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	-Ar	pplied For
21		26		65-0664206		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	•	Additional	
22		27				equired	
City & State		City & State		6. Election Campaign Financing		May Be	
Zip Country		28		Trust Fund Contribution	Added	to Fees	
Zip	Zip	Country	'	8. This corporation owes the current year Ir			
24 25 29 3					Personal Property Tax.	Yes	□No
	9. Name and Address of Current	t Registered Agent	81	Name	10. Name and Address of New Registered	Agent	
JIMENEZ, ROGELIO			01	Name			
3188 W. 70TH TERRACE			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
HIALEAH FL 33016			-	<u> </u>			
TINCEATT E 600 TO			83	1			
			84	City	FI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes, 1	he abov	e-named co	prporation submits this statement for the purpose of	f changing its	registered
office or r	registered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was autho	rized by	the corpora	ation's board of directors. I hereby accept the appo	intment as re	gistered
SIGNATURE			-11 1	2:	aired when reinstating) DATE		
12.	Signature, typed or printed name of registered agent OFFICERS ANI		13.	it signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
TITLE	P	DELETE	1.1 TITLE		7.001110110101010101010101011011011011011	☐ Change	Addition
NAME	JIMENEZ, HAYDEE		1.2 NAME		••		
STREET ADDRESS	3188 W. 70TH TERRACE			TADORESS	_		
	HIALEAH FL 33016		1.4 CITY-5				ŀ
CITY-ST-ZIP TITLE			2.1 TITLE			Change	☐ Addition
NAME			2.2 NAME	}			}
	445 W			TADORESS			
STREET ADDRESS	1 NA 1 E A 1 1 E 1 A A A A A						Į
TITLE	page .		2.4 CITY-:	31-4IF		[7] Change	Addition
			3.2 NAME				
NAME		j		TANDOFFEE			ļ
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			3.4. CITY-1 4.1 TITLE	31-ZIP		Change	☐ Addition
TITLE			4. 2 NAME	i			
NAME				TARRESO			į
STREET ADDRESS				T ADDRESS			1
CITY+ST-ZIP			4.4 CITY-S 5.1 TITLE	11-ZIP		Change	Addition
TITLE			5.2 NAME		* - • :		_
NAME ·	·			T ADDRESS	•]
STREET ADDRESS			5.4 CITY-5	ſ			
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME			_ ,	.
CALMAIT!	1			1			L L

CITY-ST-ZIP 14. 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 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 or 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, with an other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS