**PROFIT** CORPORATION ANNUAL REPORT

1999



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FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 22, 1999 8:00 am Secretary of State

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Sorporation Name	Y
CANDITO SPORTS, INC.	
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Mailing Address Principal Place of Business 2540 11TH CIRCLE 2540 11TH CIRCLE NAPLES FL 34103 NAPLES FL 34103 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/06/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 4, FEI Number CAnd to Mamnt Group 65-0760829 Not Applicable \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired П Fee Required 2626-*2624* 6, Election Campaign Financing \$5.00 May Be Added to Fees 28 Naple Trust Fund Contribution Country Country 8. This corporation owes the current year Intangible USA □No 30 Personal Property Tax. USA 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CANDITO, JOSEPH P JR Street Address (P.O. Box Number is Not Acceptable) 82 2540 11TH CIRCLE NAPLES FL 34103 83 Zip Code 84 City 85 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 was 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition ☐ DELETE 1.1 TITLE TITLE CANDITO, JOSEPH P JR 1.2 NAME NAME 2540 11TH CIRCLE 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34103 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 2.1 TITLE TITLE CANDITO, PATRICIA F 2.2 NAME NAME 2540 11TH CIRCLE 2.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34103 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 6.1 TITLE TITLE

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 all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS