


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**


**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90272 035 \*\*\*150.00

DOCUMENT # P98000009826 1. Entity Name CANDY REALTY CORP.	
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Principal Place of Business 119 EAST FLAGLER STREET MIAMI, FL 33131	Mailing Address 119 EAST FLAGLER STREET MIAMI, FL 33131
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**DO NOT WRITE IN THIS SPACE**

	
01062006	No Chg-P CR2E034 (11/05)
4. FEI Number 65-0815400	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

BLAXBERG, GRAYSON, KUKOFF & SEGAL, P.A.  
ATTN: MOISES T GRAYSON  
25 SE 2ND AVE STE 730  
MIAMI, FL 33131-1506

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

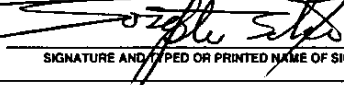
**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DD BEHAR, JOSEPH 119 EAST FLAGLER ST MIAMI, FL 33131
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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **1/6/06** **305-373-1615**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #