2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S31441

FILED Jan 13, 2007 Secretary of State

Entity Name: P.N.O. CONFECTIONERY ENTERPRISES, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
5501 NW (MIAMI, FL				
Current M	ailing Address	s:	New Mailing Addres	ss:
5501 NW (MIAMI, FL				
FEI Number:	: 65-0243634	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
GOLD, ST 6625 MIAN	UART M. 11 LAKES DR. #	217		
MIAMI LAK	(ES, FL 33014	US		
The above	(ES, FL 33014	US	ourpose of changing its registere	ed office or registered agent, or both,
The above in the State	(ES, FL 33014 named entity s e of Florida.	US	ourpose of changing its registere	ed office or registered agent, or both,
The above in the State	(ES, FL 33014 named entity se of Florida. RE:	US		ed office or registered agent, or both, Date
The above n the State SIGNATUR	named entity set of Florida. RE: Electroni	US ubmits this statement for the ເ		
The above in the State SIGNATUF	named entity set of Florida. RE: Electroni	US ubmits this statement for the particle of Signature of Registered Ag Trust Fund Contribution ().	ent	
The above in the State SIGNATUF	named entity se of Florida. RE: Electroni mpaign Financing S AND DIRECT	US ubmits this statement for the particle of Registered Age Trust Fund Contribution (). ORS: Delete	ent	Date
The above in the State SIGNATUR Election Car OFFICER: Title: Name: Address:	named entity see of Florida. RE: Electroni mpaign Financing S AND DIRECT PD () LANDA, ALICIA, 5501 NW 36 AVI MIAMI, FL	US ubmits this statement for the particle of Registered Age Trust Fund Contribution (). CORS: Delete	ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALICIA LANDA PRES 01/13/2007