CR2F034 (9/

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P30622					FILED Apr 20, 2000 8:00 am Secretary of State		
1. Entity Name							
THE CAN	NDY BARRELL, INC.						
Principal Plac	e of Business	Mailing Address			04-20-2000 900	19 011 ***150.00	
5440 LOUIE LANE. SUITE 104 RENO NV 89611		5440 LOUIE LANE. SUITE 104 RENO NV 89511-1843					
US NV 6951	•	US					
2. Principal Place of Business		3. Mailing Address				17 17 P. B. 18 18 18 18 18 18 18 18 18 18 18 18 18	
9475 Double "R" Blvd.		9475 Double "R" Blvd.		d.	[
Suite, Apt. #, etc. Suite B-15		Suite, Apt. #, etc. Suite B-15			DO NOT WRITE IN THIS SPACE		
City & State Reno, NV		City & State Reno, NV			4. FEI Number 88-0227524 Applied For Not Applicable		
Zip	Country	Zip	Country		5. Certificate of Status Desired [\$8.75 Additional Feè Required	
89511	6. Name and Address of Current	89511 Registered Agent	USA		7. Name and Address of New Regis	<u></u>	
C T CORPORATION SYSTEM				Name Street Address (P.O. Box Number is Not Acceptable)			
1200	SOUTH PINE ISLAND ROAD	Street Address (Address (P.	P.O. Box Number is Not Acceptable)		
PLAN	NTATION FL 33324					7:0-1	
· 			City			FL Zip Code	
8. The above	named entity submits this statement fo	r the purpose of changing its	registered office of	r registere	d agent, or both, in the State of Florida		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signs	ture required w	vhen reinstating)	DATE	
	pration is eligible to satisfy its intangible	1, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,	!! FEE IS \$150				
Tax filing r	equirement and elects to do so.	After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			10. Election Campaign Financi Trust Fund Contribution.	ing \$5.00 May Be Added to Fees	
11.	OFFICERS AND		12.		ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 11	
TITLE NAME	PD Pierson, Kenneth C	☐ Delete	TITLE NAME				
STREET ADDRESS CITY-ST-ZIP	680 MT ROSE ST		STREET ADDRESS CITY-ST-ZIP		75 Double "R" Blv	d, Suite B-15	
TITLE	RENO NV 89509 TD	☐ Delete	TITLE	Rei	no. NV 89511		
NAME Street address	PORTER, MARY J 680 MT ROSE ST		NAME STREET ADDRESS	94	75 Double "R" Blv	d Suite B-15	
CITY-ST-ZIP	RENO NV 89509		CITY-ST-ZIP		10, NV 89511	· · · · · · · · · · · · · · · · · · ·	
title Name	SD PIERSON-TOBEY, BETTY	☐ Delete	TITLE NAME				
STREET ADDRESS CITY-ST-ZIP	860 MT ROSE ST RENO NV 89509		STREET ADDRESS CITY-ST-ZIP		75 Double "R" Blv no, NV 89511	d., Suite B-15	
TITLE	V	☐ Delete	TITLE	1.0.	10, 11 03311		
NAME STREET ADDRESS	DINEEN, MICHAEL 680 MT ROSE ST		NAME STREET ADDRESS	947	75 Double "R" Blv	d., Suite B-15	
CITY-ST-ZIP	RENO NV 89509		CITY-ST-ZIP	Rer	no, NV 89511		
TITLE NAME		☐ Delete	TITLE NAME			Change Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
TITLE		☐ Delete	TITLE			☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP	certify that the information supplied with	this filing does not available.	CITY-ST-ZIP	atod in So-	tion 119 07(2\/i)\ Elorida Statutas 14	har cartify that the information	
io. Incland (some man are intermigned supplied with	rana ming does not quality for	TIO OVOLUBRION SE		asi, i istorigogija i igrica Statutos. I tutt	actory and the internation	

13. 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 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 this tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with abother like empowered.

SIGNATURE:

SIGNATURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Betty Pierson-Tobey, Sec

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