

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90713 023 ***158.75

DOCUMENT # K79410		
1. Entity Name HAPPY HORSE EQUINE SERVICES, INC.		

Principal Place of Business 7370 N.W. 36TH STREET., SUITE 319-G MIAMI, FL 33166 US	Mailing Address 7370 N.W. 36 STREET 319 G MIAMI, FL 33166 US
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2. Principal Place of Business 2550 N.W. 72 AVE.	3. Mailing Address 2550 N.W. 72 AVE.
Suite, Apt. #, etc. STE. 211	Suite, Apt. #, etc. STE. 211
City & State MIAMI, FLORIDA	City & State MIAMI, FLORIDA
Zip 33122	Country USA

01152004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0111289	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DELAHAZA, RENEE HAPPY HORSE EQUINE SERVICES INC. 7370 N.W. 36TH ST., STE 319-G MIAMI, FL 33166	
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7. Name and Address of New Registered Agent Name RENEE DELAMAZA Street Address (P.O. Box Number is Not Acceptable) 2550 N.W. 72 AVE STE 211 City MIAMI, FLORIDA FL Zip Code 33122	
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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.

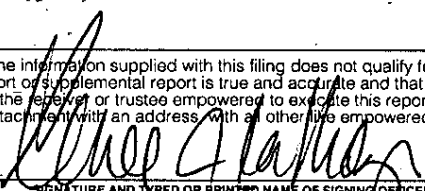
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ACOSTA, MARIA E 7370 N.W. 36TH STREET., SUITE 319-G MIAMI, FL 33166 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DELAHAZA, RENEE 7370 N.W. 36TH STREET., SUITE 319-G MIAMI, FL 33166 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARIA ACOSTA, ☒ Change ☐ Addition 2550 N.W. 72 AVE. # 211 MIAMI, FLORIDA 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RENEE DELAMAZA ☒ Change ☐ Addition 2550 N.W. 72 AVE. # 211 MIAMI, FLORIDA 33122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 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 an other duly empowered.

SIGNATURE: 	Date 4/19/04	Daytime Phone #
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