FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000080720 (3)

HAPPIN	IESS, INC.				AL TOUR BOUL TO AND VALUE OF THE SOUR
Principal Place of Business Mailing Address			_		
C/O 201 S. BISCAYNE BLVD. C/O 201 S. BISCAYNE BI SUITE 1600 SUITE 1600		/D.			
MIAMI FL 33131 MIAMI FL 33131			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	
				11/03/1994	
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0531979	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		Cily & Slato		- Frank A and Flank	Fee Required
23 7		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid th	
24 &	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	red Agent
CO	RPORATION COMPANY OF MIAN	Al	B1 Name		
	1 S. BISCAYNE BLVD.		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
SUITE 1600					
MIA	AMI FL 33131		83		
			84 City		FL 85 Zip Code
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					
12.	Signature, typed or printed name of registered agen OFFICERS AND		Registered Agent signature req	ADDITIONS/CHANGES TO OFFICERS	AND DIDECTORS IN 12
THE	D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OTT OPENS	Change Addition
NAME	HAMILTON, REX		1.2 NAME		
STREET ADDRESS	2655 LEJEUNE RD., STE. 500		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33134		1.4 City-St-ZiP		
TITLE	P	☐ DELETE	2.1 TITLE		Change Addition
NAME	RODRIGUEZ, DEBORAH		2.2 NAME		
STREET ADDRESS	2900 N.E. 188TH STREET		2.3 STREET ADDRESS		,
CITY-ST-ZIP	MIAMI FL 33180		2.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	FRIEDMAN, GEORGE H		3.2 NAME		
STREET ADDRESS	2900 N.E. 188TH STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33180	DELETE	3.4. CITY - ST - ZIP		Change Addition
TITLE Name		C. OLCER	4.1 TITLE 4.2 NAME		C Change C Adonor
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
HAME	1		5.2 NAME		46
STREET ADDRESS			5.3 STREET ADDRESS		22
€]Y-\$1-7⊮]		5.4 CITY-ST-ZIP	والمرابع والمنافر المرابع والمنافر والم	ma3
TITLE .		DELETE	6.1 TITLE	700002498 -04/24/9801003-	Change Addition
NAME			6.2 NAME	~U4/24/56~~U1UU5~ ***150 00	~U3 9

6.4 CITY-ST-ZIP

With 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 this filing formation 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 this filing formation is filled. The formation is filled in the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in filled in the filled in the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in filled in the filled in the corporation of the

FILED

Apr 23 1998 8:00am

Secretary of State