

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # 343799 1. Entity Name LABUE INCORPORATED			
Principal Place of Business D/B/A HAPPY HOUSE 4089 N. ANDREWS AVENUE FT. LAUDERDALE, FL 33309		Mailing Address D/B/A HAPPY HOUSE 4089 N. ANDREWS AVENUE FT. LAUDERDALE, FL 33309	
DO NOT WRITE IN THIS SPACE			
		04292004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 59-1237892	Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEON, YIT 4089 N. ANDREWS AVENUE FT. LAUDERDALE, FL 33309		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, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U00000148712 05/03/04-80158-015 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STP LEON, YIT 4089 N ANDREWS AVE FT LAUDERDALE, FL 00000,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEON, HONG 4089 N ANDREWS AVE FT LAUDERDALE, FL 00000,		
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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 all other like empowered.			
SIGNATURE: <i>Hong Leon</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <i>4-29-04</i> (954) <i>564-8611</i> Daytime Phone #	