## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 05, 2007 8:00 am Secretary of State **DOCUMENT # 550100** 1. Entity Name 02-05-2007 90095 009 \*\*\*150.00 HAPPY REALTY CO. Principal Place of Business Mailing Address 9960 BIRD ROAD 9960 SW 40TH ST **MIAMI FL 33165** MIAMI FL 33165 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-1775409 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LGUSQUIZA EGUSQUIZA, JOHN Street Address (P.O. Box Number is Not Acceptable) 9960 SW 40 ST 8603 SOUTH DIXIE HIGHWAY SUITE 303A PINECREST FL 33143 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 little if applicable (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. IIIU Delete HIII ☐ Change Addition EGUSQUIZA, JULIO NAME NAMI 12758 SW 38TH ST STREET ADDRESS STREET ADDRESS **MIAMI FL 33175** CITY-ST-7IE CITY - S1 - ZIP JOHN EGUSQUIZA E 9960 SW40ST MIAHI FLA 33165 THLE Delete TITLE Addition EGUSQUIZA, JOHN NAME NAME 8603 SOUTH DIXIE HIGHWAY, #303A STREET ADDRESS STREET ADDRESS PINECREST FL 33143 CITY-ST-ZIP CITY - ST - 7/P TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THIE ☐ Delete THLE ☐ Change Addition NAME STREET ADDRESS STRUET ADDRESS CITY-ST-ZIP CITY - ST - ZIP IIILE Delete THE □ Change Addition NAME NAME STRUET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - 7IP THIE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- 7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further cortify 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:

Daytime Priorie #

FILED