2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State
02-28-2001 90009 048 ****61.25

DOCUMENT # 757915

1. Entity Name

HAPPY HAMMOCK COOPERATIVE PRESCHOOL, INC.

Principal Place of Business	Mailing Address
7850 S.W. 142 AVENUE POST OFFICE BOX 960553 MIAMI FL 33296-0553	7850 S.W. 142 AVENUE POST OFFICE BOX 960553 MIAMI FL 33296-0553

32228

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2031525 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PALMA, STELLA 8904 SW 150 PL CR MIAMI FL 33196	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE Stella Palma Stella Palma 1/25/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NELSON, MARY 13390 S.W. 66TH STREET MIAMI FL 33183	☑ Delete	P Frias, Carina D 7342 SW 139 ct Miami, Fl 33183	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LANDER-LAZO, MARTHA 14604 SW 56 TERRACE MIAMI FL 33183	☑ Delete	V Martinez, Clarisa D 14950 SW 48 ter #A Miami, Fl 33185	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PALMA, STELLA 8904 SW 150 PL CR MIAMI FL 33196	☐ Delete	T Palma, Stella D 8904 SW 150 Pl. cir Miami, Fl 33196	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DIEZ, CARINA 7342 SW 139 CT MIAMI FL 33183	☑ Delete	S Aguilera, Odalys D 12460 SW 104 ter Miami, Fl 33186	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SANTANA, LEONOR 15925 SW 83 TER MIAMI FL 33193	☐ Delete	D Santana, Leonor D 15925 SW 83 ter Miami, Fl 33193	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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 617, 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: Stella Palma REQUIRED Stella Palma 1/25/01 (305) 386-8201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #