

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020936

Entity Name: HAPPYFUTURE LLC

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

350 SW 87 PATH
MIAMI, FL 33174 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 441775
MIAMI, FL 33144 US

New Mailing Address:

FEI Number: 65-1157193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERAN, MIGUEL
350 SW 87 PATH
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TERAN, MIGUEL A
Address: 350 SW 87 PATH
City-St-Zip: MIAMI, FL 33174 US

Title: MGRM () Delete
Name: GONZALEZ-ARNAL, CLARA I
Address: 350 SW 87 PATH
City-St-Zip: MIAMI, FL 33174

Title: MGRM () Delete
Name: MARTINEZ, MIGUEL
Address: 350 SW 87 PATH
City-St-Zip: MIAMI, FL 33174

Title: MGRM () Delete
Name: MENDOZA, MARIA
Address: 350 SW 87 PATH
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MIGUEL A, TERAN

MGRM

04/16/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date