2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000028616

1. Entity Name
HAPPY ENTERPRISES, LLC



FILED Apr 29, 2008 08:00 AM Secretary of State

Principal Place of Business

1909 TYLER ST, #603 HOLLYWOOD, FL 33020 Mailing Address

1909 TYLER ST, #603 HOLLYWOOD, FL 33020



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04252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 81-0578734 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BECKER, NORMAN 1909 TYLER ST, #603 HOLLYWOOD, FL 33020

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| | re named entity submits this statement for the purpose of char ations of registered agent. | ging its registered office or registered agent, or bo | th, in the State of Florida I am familiar with, and accept |
|---|---|--|--|
| SIGNATURE | | | |
| | Signature, typed or printed name of registered agent and title if applicable | (NOTE: Registered Agent signature required when reinstating) | DATE |
| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | | | U00000931735 115/22/08-80027-008 129 75 |
| 9. | MANAGING MEMBERS/MANAGERS | | ************************************** |
| TITLE | MGR | | |

BECKER, NORMAN NAME STREET ADDRESS 1909 TYLER ST, #603 CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Jama Luke MANANA DELKER 4/xs/o

Daytime Phone #