

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004022

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: HAPPY FACES SKILLS CENTER, INC

## Current Principal Place of Business:

4680 W. 13 LANE  
426  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

4680 W. 13 LANE  
426  
HIALEAH, FL 33012

## New Mailing Address:

FEI Number: 20-8896778      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEREZ, MARIA V.  
4680 W. 13 LANE  
426  
HIALEAH, FL 33012 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

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PEREZ, MARIA V.  
Address: 4680 W. 13 LANE #426  
City-St-Zip: HIALEAH, FL 33012

Title: VP ( ) Delete  
Name: SUAREZ, VICTOR SR.  
Address: 4680 W. 13 LANE #426  
City-St-Zip: HIALEAH, FL 33012

Title: S.T. ( ) Delete  
Name: CANETE, LUIS SR.  
Address: 2850 E. 5 TH AVE APT. 4 A  
City-St-Zip: HIALEAH, FL 33013

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T. (X) Change ( ) Addition  
Name: CANETE, LUIS SR.  
Address: 2850 E. 5 TH AVE APT. 4 A  
City-St-Zip: HIALEAH, FL 33013

Title: S. ( ) Change (X) Addition  
Name: SUAREZ, LIANNE  
Address: 4680 W. 13 LANE # 426  
City-St-Zip: HIALEAH, FL 33012

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA V. PEREZ

P

04/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date