## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jan 31, 2002 8:00 am P00000060638 **Secretary of State** DOCUMENT # 1. Entity Name 01-31-2002 90088 026 \*\*\*150.00 HAPPY ROCK, INC. Principal Place of Business Mailing Address 2900 W. SAMPLE RD. 2900 W. SAMPLE RD. **BOOTH 5251** BOOTH 5251 POMPANO BEACH FL 33073 POMPANO BEACH FL 33073 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-1019461 Not Applicable Zip Country 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 SICHEWSKI, JEN H 6600 NE 22ND WAY, UNIT #2327 FT LAUDERDALE FL 33308 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent both, in the State of Florida 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CR2E034 (9/01) TITLE ☐ Delete TITLE ☐ Addition SICHEWSKI SICHEWSKI, JEFEN H NAME NAME JOTI NE 68th 6600 NE 22ND WAY, UNIT #2327 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33308 TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119,07(3)(f), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

**SIGNATURE** 

changed, or on an attac

ddress, with all other like empowered.