## **2004 FOR PROFIT CORPORATION**

## Mar 17, 2004 08:00 AM... **ANNUAL REPORT** Secretary of State **DOCUMENT # P01000068898** HAPPY BURGER OF DOLPHIN MALL, INC. Principal Place of Business Mailing Address 4104 AUROURA STREET 4104 AUROURA STREET CORAL GABLES, FL 33146 CORAL GABLES, FL. 33146 02032004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1119699 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Legacine State of the State of 8. Name and Address of Current Registered Agent YEUNG, HING Y DO NOT WRITE 4104 AUROURA STREET CORAL GABLES, FL 33146 IN THIS SPACE 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE U000000091047 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 03/17/04-88044-005 150.00 OFFICERS AND DIRECTORS 10. And the state of t TITLE YEUNG, HOLS NAME and the commence with the state of the state STREET ADDRESS 4104 AUROURA STREET A series of the CITY-ST-ZIP CORAL GABLES, FL 33146 TITLE NAME YEUNG, HING YU 4104 AURORA ST STREET ADDRESS CHY-ST-ZP CORAL GABLES, FL 33146 TITLE MAME DO NOT WRITE STREET ADDRESS CRY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS

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 securate and that my signature shall have the same legal effect as if made under cath, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CRY-ST-23P TITLE NAME STREET ADDRESS

Daytime Phone #

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**FILED**