

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000015637

FILED
Feb 23, 2005
Secretary of State

Entity Name: HAPPY BROTHER'S PROPERTY, INC.

Current Principal Place of Business:

PO BOX 190148
LAUDERDALE, FL 333190148

New Principal Place of Business:

Current Mailing Address:

PO BOX 190148
LAUDERDALE, FL 333190148

New Mailing Address:

FEI Number: 74-3027022 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OULOVIIO, BENJAMIN
3301 SPANISH MOSS TER
217
LAUDERHILL, FL 33319 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NESTOR, ACSENE
Address: PO BOX 190148
City-St-Zip: LAUDERDALE, FL 333190148

Title: VD () Delete
Name: NESTOR, KARL
Address: PO BOX 190148
City-St-Zip: LAUDERDALE, FL 333190148

Title: SD () Delete
Name: MONPREMIER, WESTERBAND
Address: PO BOX 190148
City-St-Zip: LAUDERDALE, FL 333190148

Title: TD () Delete
Name: BENJAMIN, OULOVIIO
Address: PO BOX 190148
City-St-Zip: LAUDERDALE, FL 333190148

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OULOVIIO BENJAMIN

TD

02/23/2005

Electronic Signature of Signing Officer or Director

Date