## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** 

P02000126957



**FILED** 

HAPPY FACE ADVERTISING INC.							05-01-2003 90136 026 *****150.00		
Principal Place of Business 13519 SW 112TH CT. MIAMI FL 33176		13519 SW 112	Mailing Address 13519 SW 112TH CT. MIAMI FL 33176			1 NEBINGAL IKI DANB BIDIK BUNU DANK BUNU BIDIK	111 (1616 B)(11 (1610) (	11/11 1 <b>1/</b> 1 1 <b>1/</b> 1	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAK	ING CHANGES		
City & State		City & State				4. FEI Number 55 - 0810 614		plied For at Applicable	
Zip		Country	Zip		Country		5. Certificate of Status Desired	\$8.75 Add	
	6. Name	and Address of Currer	nt Registered Agen	t			7. Name and Address of New Register	ed Agent	
					Name				
ABARCA, CHRISTIAN A				Street A	ddress (P.	s (P.O. Box Number is Not Acceptable)			
13519 SW 112TH CT. MIAMI FL 33176									
					City		F	Zip Code	9
	named entit		for the purpose of c	hanging its reg	gistered office or	registered	d agent, or both, in the State of Florida. 1	am familiar with,	and accept
<del>-</del>	_	•							
SIGNATURE	Signature, typed	or printed name of registered age	of and title if applicable	(NOTE: Be	egiptordal A cont pignot	es societad			
							hen reinstating) DAT	IE.	<b> </b>
		<u> </u>		(110.12.110	egisiere) Agent signati	18 reduiled W	hen reinstating) DA1	<u> </u>	
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Afte	r May 1, 200	<u> </u>	)		sylsiered Agent Signatu			\$5.0	O May Be to Fees
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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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE:** 

NAME

STREET ADDRESS

CITY-ST-ZIP

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