## 2008 FOR PROFIT CORPORATION ANNUAL REPORT



FILED Jan 29, 2008 8:00 am Secretary of State

|--|

DOCUMENT # P03000047642  1. Entity Name HAPPY GARDEN OF PALM BAY, INC.					01-29-2008 90012 009 ***150.00				
Principal Plac 2099 PALM PALM BAY, F	BAY ROAD NE	Mailing Address 2099 PALM BAY ROAD NE PALM BAY, FL 32905		400					
Principal Place of Business - No P.O. Box #     Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01162008	Chg-P		4 (12/06)		
City & State		City & State		4. FEI Number 04-3754				plied For t Applicable	
Zip	Country	Zip	Coun	try		f Status Desired		8.75 Add	itional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New R	egistered A	gent	
Name								-	
YANG, KENT 2099 PALM BAY ROAD NE PALM BAY, FL 32905				Street Address (P.O. Box Number is Not Acceptable)					
			City			FL	Zip Code	)	
8. 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									
After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees									
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AND	DIRECTORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YANG, KENT 2099 PALM BAY ROAD NE PALM BAY, FL 32905	☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZHEN, HUANG GUO 2099 PALM BAY ROAD NE PALM BAY, FL 32905	☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delote						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 12.   hereby r	certify that the information supplied with	Delete	CITY	ET ADDRESS -ST-ZIP	in Chapter 119,	Florida Statutes. I	further certif	☐ Change	Addition  Addition

accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if the thick empowered.

Daytime Phone #