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FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P95000064233 (6)
 1. Corporation Name
HAPPY WORLD LATIN AMERICA, INC.



Principal Place of Business: **169 EAST FLAGLER ST. SUITE 1527 MIAMI FL 33131**

Mailing Address: **169 EAST FLAGLER ST. SUITE 1527 MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

3. Date Incorporated or Qualified: **08/18/1995**

4. FEI Number: **65-0619251**

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent: **PEDROSO, ACELO I 169 EAST FLAGLER STREET SUITE 1627 MIAMI FL 33131**

10. Name and Address of New Registered Agent (81-85) fields.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	PSD
NAME	PURUTA, MOTOO	1.2 NAME	
STREET ADDRESS	169 E. FLAGLER STREET #1527	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	1.4 CITY-ST-ZIP	
TITLE	VPTD	2.1 TITLE	VD
NAME	HAYASHI, JUNICHI	2.2 NAME	
STREET ADDRESS	% 169 E. FLAGLER ST. #1527	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	2.4 CITY-ST-ZIP	
TITLE	KOUSAKU	3.1 TITLE	T
NAME		3.2 NAME	KOUSAKU MAEHATA
STREET ADDRESS		3.3 STREET ADDRESS	17021 N. BAY RD. ROOM #105
CITY-ST-ZIP		3.4 CITY-ST-ZIP	N. MIAMI BEACH FL 33160
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Junichi Hayashi* JUNICHI HAYASHI Vice President 4/15/98 (305) 430-0435

CR2E034 (10/97)