

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000065901

1. Entity Name

HAPPY KIDS TOO, INC.

Principal Place of Business

1700 JEFFERSON AVENUE  
MIAMI BEACH FL 33139

Mailing Address

1700 JEFFERSON AVENUE  
MIAMI BEACH FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0603189

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUSI, DIANA  
7725 NOREMAC AVENUE  
MIAMI BEACH FL 33141

Name

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVSD ☐ Delete  
NAME SUSI, DIANA  
STREET ADDRESS 7118 BYRON AVENUE  
CITY-ST-ZIP MIAMI BEACH FL 33141

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME SUSI, DORA  
STREET ADDRESS 7118 BYRON AVENUE  
CITY-ST-ZIP MIAMI BEACH FL 33141

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**Jul 13, 2000 8:00 am**  
**Secretary of State**

07-13-2000 90020 045 \*\*\*\*80.00

03-02-2000 90065 019 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000065901

i. Entity Name

HAPPY KIDS TOO, INC.

Attachment

00009793

Principal Place of Business  
JEFFERSON AVENUE  
BEACH FL 33139

Mailing Address

1700 JEFFERSON AVENUE  
MIAMI BEACH FL 33141-0597

P.O. Box 41-4597



DO NOT WRITE IN THIS SPACE

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0603189

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

M.B. FL.

City

FL

Zip Code

SUSI, DIANA

7725 NOREMAC AVENUE  
MIAMI BEACH FL 33141

7118 Byron Ave.

33141

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

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

STREET ADDRESS ST-ZIP	PVSD SUSI, DIANA 7118 BYRON AVENUE MIAMI BEACH FL 33141	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
STREET ADDRESS ST-ZIP	T SUSI, DORA 7118 BYRON AVENUE MIAMI BEACH FL 33141	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE STREET ADDRESS ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
STREET ADDRESS ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE STREET ADDRESS ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE STREET ADDRESS ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/00

305-864-744

PROGRAMS FOR:  
Infants, Toddlers,  
Pre-Schoolers &  
After-Schoolers



Attachment  
DH# P95000065901  
DUN 69793

H.R.S. LICENSED  
QUALIFIED STAFF

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

July 6, 2000

RE: Document # P95000065901

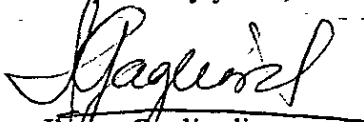
Dear Gentleman:

Today we received a second notice to file the annual report. For this reason we called the Department of State and found out that we paid \$70.00 instead of \$150.00. This was due to a confusion because of the filing of another non-profit organization that we have.

Enclosed please find our check #3957 for the amount of \$80.00 and a copy of the report that we filled with you before. We would like to say that we never received a notice of balance due from your department. We would like to you to take this reason in consideration and do not charge us with penalties since we paid always our dues in time.

Please contact me at 305-864-7447 if you have any questions.

Respectfully yours,

  
Ilana Gagliardi  
Office Manager

7118 Byron Avenue  
Miami Beach, FL 33141  
Phone (305) 864-6362

2217 Normandy Drive  
Miami Beach, FL 33141  
Phone (305) 865-3207

1700 Jefferson Avenue  
Miami Beach, FL 33139  
Phone (305) 673-9130

676 N.E. 80th Street, Shorecrest  
Miami, FL 33138  
Phone (305) 754-4700