SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700003764 (2)

HAPPY SOLES/BIRKENSTOCK, INC.

Principal Place of Business

1474 WEST GRANADA BLVD.
ORMOND BEACH FL 32174

DO NOT WRIT

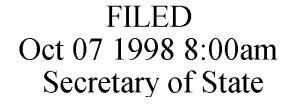
3. Date Incorporated or Qualified
01/07/1997

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

250 — 24.7 2 7 9





DO NOT WRITE IN THIS SPACE

21		26				ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.		5. Certificate of Status Desired \$8.75	Additional equired	
City & Sta	to	City & State				May Be to Fees	
Zip 24	Country 25	2φ 29	30 Coi	untry	8. This corporation owes or has paid the current year Int Personal Property Tax due June 30. Yes	angible] No	
L	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent		
GEOR COLITHIDOINT DD CARRO				81 Name	31 Name		
				82 Street Address (P.O. Box Number is Not Acceptable)			
UAC	100141EEE 1 E 32210-0913			83			
				84 City	FL 85 Zip (Code	
office or	t to the provisions of sections 607.0502 registered agont, or both, in the State of am familiar with, and accept the obligations of the state of the	of Florida. Such chang tions of, section 607.0	e was authorize 505, Florida Sta	d by the corpor tules.	rporation submits this statement for the purpose of changing its re ration's board of directors. I hereby accept the appointment as re	gistered gistered	
12.	OFFICERS AND		■ 13.	our region officials	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	DRS IN 12	
TITLE	D	D£L	ETE 1.1 TH	TLE	Change	Addition	
NAME	FREEMAN, PEGGY		1.2 No	AME	<u> </u>		
\$TREET ADDRESS	1.00			REET ADDRESS			
CITY-ST-ZIP	ORMOND BEACH FL 32174		1.4 CI	1Y-S1-ZIP			
TITLE		[¨] DE L	E3E 2.131	1LF	Change	Addition	
NAME			2.2 N/	AME	sagoozes79 0 6°		
STREET ADDRESS			2.3 ST	REET ADDRESS	-10/07/38010730 4 3		
CITY-ST-7/P				1Y-ST-ZIP	***150.00		
TITLE		[_] DEL			Change	Addition	
NAME			3.2 NA	AME			
STREET ADDRESS			3.3 ST	REET ADDRESS	1		
CITY-ST-ZIP				TY-ST-2(P	· · · · · · · · · · · · · · · · · · ·		
TITLE		[,] DEL		1	L	Addrbon	
NAME			4.2 N/		2h10	ノン	
STREET ADDRESS				REF1 ADDRESS		′ /	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	the second of the second	TY-ST-ZIP	/5 /		
TITLE		[]] DE L			Change	Addition	
NAME			5.2 NA			ļ	
STREET ADDRESS			1	REET ADDRESS			
CITY-ST-ZIP TITLE	 .			IY-ST-ZIP		·	
NAME		[] DELI	-10		L Change	Addition	
			6 2 NA				
STREET ADDRESS				REET ADDRESS			
14. I hereby ce	ertify that the information supplied with	his filing does not guel	ify for the exemp	Y-ST-ZIP	section 119 (17/3)(i) Florida Statutes I further certify that the information	vation	
indicated of an officer of in Block 12	on this a nnual report or supplement a a or dire cto r of the corporation or the rect or Bl oc k 13 if changed, or on an apace	Inual report is true an liver or trustee emport timent with an addres	d accurate and leared to execute it.	hat my signatu this report as	ection 119.07(3)(i), Florida Statutes. I further certify that the inform thall have the same legal effect as if made under oath; that I dedured by Chapter 607, Florida Statutes; and that my name ap	am pears	