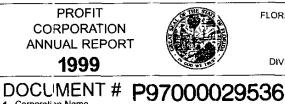
PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPAF:TMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90033 029 ***150.00

HAPPY i	HOMES REALTY	, INC.										
Principal Place of Business 128 N PARSONS AVE BRANDON F(33510 US			Mailing Address 128 N PARSONS AVE BRANDON FL 33510 US				DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualifed	i			
								03/31/1997			1.45	4
2. Principal Place of Business			2a, Mailing Address					4. FEI Number 59-3440064		<u> </u>	ol ed For Applicable	-{
21	# -4-		Suite, Apt. #, etc.					<u> </u>		\$8.75 A	:-	1
Suite, Art. #, etc.			27					5. Certificate of Status Desired		Fee Required		
City & State			City & State					6. Election Campaign Financing \$5.00 N ay Be				
23			28					Trust F and Contribution Added to Fees			Fees	1
Zip	Cour	iry	_Zip	Cou	ntṛy			8. This corporation owes the cu	rent year In		4	-
24	25		29	30				Person al Property Tax.		☐ Yes	Ç ⊈ No	1
	9. Name and Add	ess of Current F	legistered Agent					10. Name and Address of New	Registere	Agent		-
ICAL	ITO DEMNIET O				81	Name						
JCNES, BENNET S 2908 BEAGLE PLACE SEFFNER FL 33584					82 Street Ad		ddress	dress (P.O. Box Number is Not Acceptable)				1
												4
SEF	FNEH FL 33384				83							
					84	City			FI	85 Zip C	ode	1
office cr r	registered agent, or bo	h, in the State of cept the obligation	Florida. Such change was ns of, Section 607.0505, F	authorized	i by t utes.	the corpo	ration's		DATE	onument as rec		6
12.	2. OFFICERS		AND DIRECTORS					ADDITIONS/CHANGES TO O	FFICERS A			ļ §
TITLE	PD		DELETE	1.1 TI	ΠE					Change	☐ Addition	=
NAME	JONES, BENNET S			1.2 NAME								8
STREET ADDRESS	2908 BEAGLE PL	2908 BEAGLE PLACE		1.3 ST	1.3 STREET ADDRESS							CR2E034 (11/98)
CITY-ST-ZIP	SEFFNER FL 335	84		1.4 CI	1.4 CITY-ST-ZIP							1 送
TITLE	J	☐ DELETE		2.1 11	2.1 TITLE					Change	☐ Addition	
NAME				2.2 N	ME	-						
STREET ADDRESS				2.3 \$1	REET	ADDRESS						1
CITY-ST-ZIP				2.4 C	ITY-SI	T-ZIP						4
TITLE			_ DELETÉ_	3.1 TI	ΠE			<u> </u>	-	Change	Addition	
NAME				3.2 N	ME							
STREET ADDRESS	;			3.3 \$1	REET	ADDRESS						
CITY-ST-ZIP				-	ITY-S1	T-ZIP				[] (h		╣
TITLE			☐ DELETE	4.1 TI	ΠE					Change	Addition)
NAME				4, 2 N	AME							
STREET ADDRESS	;			4.3 ST	REET	ADDRESS						
CITY-ST-ZIP					TY-ST	-ZIP				Channe	[A J J J J J J J J J J J J J J J J J J	-
TITLE			☐ DELETE	5,1 TI		ļ				Change	Addition	1
NAME	(5.2 N/								
STREET ADDR :SS	8			1		ADDRESS						
CITY-ST-ZIP	_				TY-ST	-ZIP				Change	- Addition	4
TITLE			☐ DELETE	6.1 TI		ļ				Change	Addition	1
NAME				6.2 N/	WE	1						1

14. I here by 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that it 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 change for on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS