2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 08:00 A Secretary of State

ANNUAL REPORT				Apr 25, 2007 06:0 Secretary of Sta		
DOCUMENT # P97000103422 1. Entity Name HAPPY HOME INVESTMENTS, INC.					30	ecretary of Sta
16710 NW	ice of Business 84 CT CS, FL 33016 US	Malling Address C/O IVAN A GOMEZ, P.A. 601 BRICKELL KEY DR., #507 MIAMI, FL 33131 US		 	1800 (1828 (1800 (1800 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1801 (1	
)				03182007	No Chg-P	CR2E034 (11/05)
	O NOT WRITE	IN THIS SPA		4. FEI Numbe 65-0799		Applied For Not Applicable \$8.75 Additional
	6. Name and Address of Current Re	nistanad Anant	Market Barrier	eria, sar George	CONTRACTOR OF STATE O	Fee Required
IAG CORPORATE SVCS., INC 601 BRICKELL KEY DR. STE. 507 MIAMI, FL 33131				。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	NOT W HISISP	
8. The above the obliga SIGNATURE	e named entity submits this statement for the tions of registered agent. Signature, hyped or printed name of registered agent and		ed office or register		n, in the State of Flor	ida. I am famillar with, and accept
FILE NOWII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Slection Campaign Finan Trust Fund Contribution.	.00 May Be ed to Fees			
10.	OFFICERS AND DIE	RECTORS	A Prince of the second	及初级扩展		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD HERNANDEZ, REINALDO D 16710 NW 84 CT MIAMI LAKES, FL 33016					7.000 pp.000
JITLE NAME STREET ADDRESS CITY-ST-ZIP					#5703707-8	0015-005 rse.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	KOT W	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·				HISISP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE	 		医的 點點 門			· · · · · · · · · · · · · · · · · · ·

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate each 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

MATURE SET TYPES OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR
REINALDO D'HERNANDEZ, President

4.18.07 Date

(305)371 9213