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Feb 09, 1999 8:00 am  
Secretary of State

02-09-1999 90017 035 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000050059

1. Corporation Name  
HAPPY KIDS J. Y. INC.

Principal Place of Business

24 N MIAMI AVE  
MIAMI FL 33128

Mailing Address

24 N MIAMI AVE  
MIAMI FL 33128

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1998

4. FEI Number

65-0840975

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required6. Election Campaign Financing ☐\$5.00 May Be  
Added to Fees8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

21. Principal Place of Business

21. Suite, Apt. #, etc.

22. City &amp; State

23. Zip Country

24. City &amp; State

25. Zip Country

26. Mailing Address

26. Suite, Apt. #, etc.

27. City &amp; State

28. Zip Country

29. City &amp; State

30. Zip Country

9. Name and Address of Current Registered Agent

LEE, JAE SIK  
474 NE 210 CIR TERRACE #104  
N MIAMI BEACH FL 33179

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. Zip Code

FL

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE1.2 NAME  
LEE, YONG SOOK  
1.3 STREET ADDRESS  
474 NE 210 CIR TERRACE #104  
1.4 CITY-ST-ZIP  
N MIAMI BEACH FL 331792.1 TITLE ☐ DELETE2.2 NAME  
LEE, JAE SIK  
2.3 STREET ADDRESS  
474 NE 210 CIR TERRACE #104  
2.4 CITY-ST-ZIP  
N MIAMI BEACH FL 331793.1 TITLE ☐ DELETE3.2 NAME  
LEE, JAE SIK  
3.3 STREET ADDRESS  
474 NE 210 CIR TERRACE #104  
3.4 CITY-ST-ZIP  
N MIAMI BEACH FL 331794.1 TITLE ☐ DELETE4.2 NAME  
LEE, JAE SIK  
4.3 STREET ADDRESS  
474 NE 210 CIR TERRACE #104  
4.4 CITY-ST-ZIP  
N MIAMI BEACH FL 331795.1 TITLE ☐ DELETE5.2 NAME  
LEE, JAE SIK  
5.3 STREET ADDRESS  
474 NE 210 CIR TERRACE #104  
5.4 CITY-ST-ZIP  
N MIAMI BEACH FL 331796.1 TITLE ☐ DELETE6.2 NAME  
LEE, JAE SIK  
6.3 STREET ADDRESS  
474 NE 210 CIR TERRACE #104  
6.4 CITY-ST-ZIP  
N MIAMI BEACH FL 33179

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition1.2 NAME ☐ Change ☐ Addition1.3 STREET ADDRESS ☐ Change ☐ Addition1.4 CITY-ST-ZIP ☐ Change ☐ Addition2.1 TITLE ☐ Change ☐ Addition2.2 NAME ☐ Change ☐ Addition2.3 STREET ADDRESS ☐ Change ☐ Addition2.4 CITY-ST-ZIP ☐ Change ☐ Addition3.1 TITLE ☐ Change ☐ Addition3.2 NAME ☐ Change ☐ Addition3.3 STREET ADDRESS ☐ Change ☐ Addition3.4 CITY-ST-ZIP ☐ Change ☐ Addition4.1 TITLE ☐ Change ☐ Addition4.2 NAME ☐ Change ☐ Addition4.3 STREET ADDRESS ☐ Change ☐ Addition4.4 CITY-ST-ZIP ☐ Change ☐ Addition5.1 TITLE ☐ Change ☐ Addition5.2 NAME ☐ Change ☐ Addition5.3 STREET ADDRESS ☐ Change ☐ Addition5.4 CITY-ST-ZIP ☐ Change ☐ Addition6.1 TITLE ☐ Change ☐ Addition6.2 NAME ☐ Change ☐ Addition6.3 STREET ADDRESS ☐ Change ☐ Addition6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)