2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: _

FILED Feb 09, 2001 8:00 am DOCUMENT # P98000108347 **Secretary of State** 1. Entity Name HAPPY HOUR, INC. 02-09-2001 90110 006 ***150.00 Principal Place of Business Mailing Address 220 COMMERCIAL BLVD. 220 COMMERCIAL BLVD. FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33306 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0884207 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MEGHANI, SULTANALI Street Address (P.O. Box Number is Not Acceptable) 2200 COMMERCIAL BLVD. FORT LAUDERDALE FL 33308 City Zip Code FI 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ■ Addition PSTD | ☐ Change ☐ Delete TITLE TITLE NAME MEGHANI, SULTANALI NAME STREET ADDRESS 220 COMMERCIAL BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33308 ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Chance TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 part like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

Department of the Treasury

Election by a Small Business Corporation (Under section 1362 of the Internal Revenue Code)

▶ See Parts II and III on back and the separate instructions.

OMB No. 1545-0146

Internal Reven	tue Service	ation may either send or fax this	form to the IRS.	See page	1 of the instru	ctions.		
Notes: 1.		ation can be accepted only if all the (no photocopies); and the exact n						
2.	Do not file Form 1120S, U.S.	Income Tax Return for an S Corpor	ration, for any tax y	ear before	the year the el	ection takes effect.		
3.	If the corporation was in existen	nce before the effective date of this	election, see Taxe	s an S Cor	poration May	Owe on page 1 of the ins	tructions.	
Part I	Election Information							
Please Type or Print	Name of corporation (see instructions) HAPPY HOUR, INC.					A Employer identification number 65-0884207		
	Number, street, and room or suite no. (If a P.O. box, see instructions.) 220 COMMERCIAL BLVD.				B Da 12	B Date incorporated 12/31/98		
	City or town, state, and ZIP code FORT LAUDERDALE, FL 33308				C St FI	C State of incorporation FLORIDA		
		ar beginning (month, day, year)	<u></u>		 	. ⊳ //	<u>' </u>	
E Name and title of officer or legal representative who the IRS may call for more information SULTANALI MEGHANI						F Telephone number of officer or legal representative (954) 748-5672		
G If the o	corporation changed its name	or address after applying for the	e EIN shown in A	above, ch	eck this box	<u> </u>	. ▶ □	
of the date th	following: (1) date the corpore corporation began doing b	irst tax year the corporation existration first had shareholders, (2 usiness) date the corpor	ration first	had assets,	or (3) 01,01 /	01	
J Selecte	ed tax year; Annual return wil	be filed for tax year ending (mo	nth and day) ▶	Dece	ember 3			
If the t of Dec	tax year ends on any date of tember, you must complete t	her than December 31, except for Part II on the back. If the date ye e date. See Temporary Regulation	or an automatic 5 you enter is the e	2-53-weel Inding dat	k tax year end	ing with reference to th	e month ear, write	
J Name and address of each shareholder; shareholder's spouse having a community property interest in the corporation's stock; and each tenant in common, joint tenant, and tenant by the entirety. (A husband and wife (and their estates) are counted as one shareholder in determining the number of shareholders without regard to the manner in which the stock is owned.)		K Shareholders' Consent Statement. Under penalties of perjury, we declare that we consent to the election of the above-named corporation to be an S corporation under section 1362(a) and that we have examined this consent statement, including accompanying schedules and statements, and to the best of our knowledge and belief, it is true, correct, and complete. We understand our consent is binding and may not be withdrawn after the corporation has made a valid election. (Shareholders sign and date below.)		L		M Social security	N Share- holder's	
				Number of shares	Dates acquired	number or employer identification number (see instructions)	tax year ends (month and day)	
		Signature	Date					
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Under penalties of perjury, I declare that I have examined this election, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete

Signature of officer ▶

For Paperwork Reduction Act Notice, see page 4 of the instructions.

Cat. No. 18629R

Form 2553 (Rev. 1-2001)