FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S83855**

1. Corporation Name

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90136 041 ***150.00

HAPPY (DAY SERVICES, INC.				<u>:</u>				
Principal Flace	e of Business	Mailing Address					11.01 B1(1 B1(1)	0491 070 019 07	MIT WISH !
22508 SEA BASS DR 22508 SEA BASS DR BOCA RATON FL 33428 BOCA RATON FL 33428			:			DO NOT WR	ITE IN TH	IS SPACE	
					I =-	ncorporated or Qualifed			
2. Principa I Pl	lace of Business	2a. Mailing Address			4. FEIN			Арј	lied For
21		26			65-0	293538			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5, Certifo	cate of Status Desired		\$8.75 A	quired
City & 5 tate	e	City & State			l l	cn Campaign Financing Fund Contribution		\$5.00 Added to	
Zip Country 4 25		Zip	Country 30		Į =-	corporation owes the cur mal Property Tax.	rent year l	ntangible Yes	X(No
	9. Name and Address of Current	Registered Agent			10. Name	and Address of New	Register	d Agent Z	
				81 Name					
HOUSE JR, ALLEN C. 22508 SEA BASS DR BOCA RATON FL 33428				82 Street	Address (P.O. Bo	Number is Not Accept	able)		
				-					
DUC	A RATUN FL 33420			83					
				84 City			 F'	85 Zip C	ode
44 Duenus nt	to the provisions of Sections 607,0502	and 607 1508, Florida Sta	iti tos the al	nove-named	cr-moration subm	i s this statement for the	purnose (of changing its r	egistered
office or n	egistered agent, or both, in the State of familiar with, and accept the obligat	r f Florida. Such change was	s authorized	by the corpo	oration's board of	directors. I hereby acce	pt the app	ointment as reg	istered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NO	OT :: Registered	Agent signature n	equired when reinstating))	DATE		
12.	OFFICERS AN	I) DIRECTORS	13.		ADDIT	ONS/CHANGES TO OF	FICERS		
TITLE	DP	☐ DELETE	1 1 TIT	LE				Change	☐ Addition
NAME	HOUSE, ALLEN C JR		1,2 NA	1					
STREET ADDRESS	22508 SEA BASS DR		1,3 ST	REET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL	□ oc rtr		Y-ST-ZIP				Change	Addition
TITLE	DST WATER EEN	☐ DELETE	2 1 TIT					□ cuange	
NAME	HOUSE, KATHLEEN		22 NA						
STREET ADDRESS	22508 SEA BASS DR			REET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL	. DELETE	2. 4 Cl	TY-ST-ZIP				Change	Addition
}	-	· Ca peterie	32 NA	ļ		_			
NAME STREET ADDRESS			I '	REET ADDRESS					
CITY-ST-ZIP				TY-ST-ZIP					
TITLE		☐ DELETE	4.1 TIT					☐ Change	☐ Addition
NAME			4, 2 N	VME I					
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP				Y-ST-ZIP					
TITLE		☐ DELETE	5.1 TIT	LE .				☐ Change	Addition
NAME			5.2 NA	ME					
STREET ADDRE IS			5 3 ST	REET ADDRESS					
CITY-ST-ZIP			5.4 CI	TY-ST-ZIP					
TITLE		☐ DELETE	6.1 TF	TE				Change	Addition

CITY-ST-ZIP 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 a lighter like empowered.

6.2 NAME

63 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

Allen C. House R. ALLEN C. HOUSE, JR 4-22-99
SIGNATURE AND TYPED OR I RINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)