

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V21094

**FILED**  
**Feb 23, 2009**  
**Secretary of State**

**Entity Name:** HAPPY HAMMER FINISH CARPENTRY CORP.

**Current Principal Place of Business:**

800 WEST 73 PLACE  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

800 WEST 73 PLACE  
HIALEAH, FL 33014

**New Mailing Address:**

FEI Number: 65-0323200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOMEZ, EVELIO  
800 W 73RD PLACE  
HIALEAH, FL 33014 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: GOMEZ, EVELIO,  
Address: 800 W 73RD PLACE  
City-St-Zip: HIALEAH, FL

Title: SD ( ) Delete  
Name: GOMEZ, BENITA,  
Address: 800 W 73RD PLACE  
City-St-Zip: HIALEAH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELIO GOMEZ

PRES

02/23/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date