FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 13 AM 10:02

DOCUMENT # V55484 (2)

1. Corporation Name
HAPPY FACE - AUTO SALE, INC.

Principal Place of Business	Mailing Address
81 NW 22ND AVE. MIAMI FL 33125 US	81 NW 22ND AVE. MIAMI FL 33125 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/05/1992
3a. Date of Last Report: 05/12/1994

2. Principal Place of Business
21: SAME
Suite, Apt. #, etc.
22: SAME
City & State
23: SAME
Zip
24: SAME
Country
25: SAME

2a. Mailing Address
26: SAME
Suite, Apt. #, etc.
27: SAME
City & State
28: SAME
Zip
29: SAME
Country
30: SAME

4. FEI Number: 65-0352121 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SOCORRO, RAMON
74 WEST 10 ST., #6
HIALEAH FL 33010

10. Name and Address of New Registered Agent

81 Name: DAVID MOYA
82 Street Address (P.O. Box Number is Not Acceptable): 2120 S.W. 4TH STREET # 5
83:
84 City: MIAMI FL 85 Zip Code: 33135

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: DAVID MOYA — PRESIDENT — 1/7/95
(Typed or printed name of person signing) (Title if applicable) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	PRESIDENT ☐ Change ☐ Addition
NAME	MOYA, DAVID	12 NAME	DAVID MOYA
STREET ADDRESS	2120 SW 4TH ST., #5	13 STREET ADDRESS	2120 S.W. 4 ST # 5
CITY ST ZIP	MIAMI FL 33135	14 CITY ST ZIP	MIAMI, FL. 33135
TITLE	V	21 TITLE	VICE-PRESIDENT ☐ Change ☐ Addition
NAME	GONZALEZ, OSCAR	22 NAME	OSCAR GONZALEZ
STREET ADDRESS	290 W. PARK DR., #204	23 STREET ADDRESS	290 W. PARK DRIVE # 204
CITY ST ZIP	MIAMI FL 33172	24 CITY ST ZIP	MIAMI FL. 33172
TITLE	T	31 TITLE	CHAIRMAN & TREASURER ☐ Change ☐ Addition
NAME	SOCORRO, RAMON	32 NAME	RAMON SOCORRO
STREET ADDRESS	74 W. 10TH ST., #6	33 STREET ADDRESS	74 W. 10TH ST # 6
CITY ST ZIP	HIALEAH FL 33010	34 CITY ST ZIP	HIALEAH, FL. 33010
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: DAVID MOYA — 1/6/95 — (305) 541-7559
SIGNATURE(S) AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #