

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010801

Entity Name: HAPPY FACES USA INC**Current Principal Place of Business:**3705 NW 115 AVENUE
BAY #2, 2ND FLOOR
MIAMI, FL 33178**Current Mailing Address:**3705 NW 115 AVENUE
BAY #2, 2ND FLOOR
MIAMI, FL 33178 US**FEI Number:** 45-3848756**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RODRIGUEZ, ANDRES
150 SE 2ND AVE
404
MIAMI, FL 33131 US*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**Officer/Director Detail :**

Title	PED
Name	TARUD SR., FRANCISCO
Address	4775 COLLINS AVENUE APT 1407
City-State-Zip:	MIAMI BEACH FL 33140

Title	VPD
Name	TARUD, SOFIA
Address	4775 COLLINS AVE APT 1407
City-State-Zip:	MIAMI BEACH FL 33140

Title	DS
Name	TARUD, SOFY
Address	4775 COLLINS AVE APT 1407
City-State-Zip:	MIAMI BEACH FL 33140

Title	D
Name	TARUD, KAREN
Address	4775 COLLINS AVE APT 1407
City-State-Zip:	MIAMI BEACH FL 33140

Title	D
Name	ARUD, CINDY
Address	4775 COLLINS AVE APT 1407
City-State-Zip:	MIAMI BEACH FL 33140

Title	DT
Name	TARUD JR., FRANCISCO
Address	4775 COLLINS AVE APT 1407
City-State-Zip:	MIAMI BEACH FL 33140

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANCISCO TARUD SR.

PED

05/01/2020

Electronic Signature of Signing Officer/Director Detail_____
Date