

PLEASE READ ALL INSTRUCTIONS BEFORE

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 16 AM 9:46

DOCUMENT # P02000021693

1. Corporation Name

HG & A Enterprises, Inc.

2. Principal Office Address

4113 SW 91 CT

Suite, Apt. #, etc.

3. Mailing Office Address

4113 SW 91 CT

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33165

Country

USA

Zip

33165

Country

USA

700068562187
03/24/06--01007--030 ***450.00
CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

2/26/02

5. FFL Number

02-0555562

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Coronado, Nestor

Street Address (P.O. Box Number is Not Acceptable)

7360 Coral Way

Suite, Apt. #, Etc.

21

City

Miami

State

FL

Zip Code

33155

REINSTATEMENT 04-06

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Alvarez, Heriberto J	4113 SW 91 CT	Miami / FL / 33165
VSD	Alvarez, Gaisha	4113 SW 91 CT	Miami / FL / 33165
VPD	Alvarez, Aynar	4113 SW 91 CT	Miami / FL / 33165

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

(Gaisha Alvarez)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

AS PER OUR PHONE CONVERSATION I AM SENDING TO YOU THIS LETTER OF EXPLANATION AND THE UBR FORM ALONG WITH A CHECK TO PROPERLY UPDATE CORPORATION I FURTHER STATE THAT I DID NOT RECEIVE THE NOTICE FOR 2004 UBR FIRST NOR SECOND NOTICE. I WOULD LIKE TO RESOLVE THIS ISSUE, PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

I HAVE A NEW MAILING ADDRESS PLEASE MAKE A NOTE OF IT.

CORDIALLY,


GAISHA ALVAREZ
V-PRESIDENT