

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F11957			
1. Entity Name H G TRADING CORP.			
Principal Place of Business 12226 SW 131ST AVE MIAMI, FL 33186-6402		Mailing Address 12226 SW 131ST AVE MIAMI, FL 33186-6402	
DO NOT WRITE IN THIS SPACE			
		 04302006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2075330	Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARCES, HERNAN, JR 12226 SW 131 AVE MIAMI, FL 33186		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U00000562006 05/19/06-80038-006 150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GARCES, HERNAN JR 11712 SW 95 STREET MIAMI, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GARCES, CLAUDIA 11712 SW 95 STREET MIAMI, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		04/28/06 3052550151	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	