2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000043762

1. Entity Name
HG CAPITAL PARTNERS, LLC

Principal Place of Business	Mailing Address
1200 E PONCE DE LEON BLVD MIAMI, FL 33134 US	1200 E PONCE DE LEON BLVD MIAMI, FL 33134 US

DO NOT WRITE IN THIS SPACE

04192006No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-0666271	Not Applicable

5. Certificate of Status Desired   ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, OMAR
1200 E PONCE DE LEON BLVD
MIAMI, FL 33134

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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
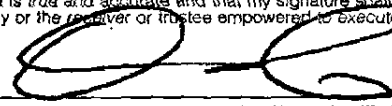
Filing Fee is $50.00
Due by May 1, 2006

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR	U00000541627 05/10/06-80063-015 50.00
NAME	HERNANDEZ, OMAR A	
STREET ADDRESS	1200 E PONCE DE LEON BLVD	
CITY-ST-ZIP	MIAMI, FL 33134	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

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IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____   04.26.06   (305)442-7575

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #