

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2008 08:00 AM
Secretary of State

DOCUMENT # M06000001930

1. Entity Name
H & G POWERLINE, LLC



Principal Place of Business
**65 WEST 36TH STREET, SUITE 1200
NEW YORK, NY 10018**

Mailing Address
**65 WEST 36TH STREET, SUITE 1200
NEW YORK, NY 10018**



01042008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4711849

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GY CORPORATE SERVICES, INC.
2 S. BISCAYNE BOULEVARD, SUITE 3400
MIAMI, FL 33131**

**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)

000000792777

01/24/08-80022-014 143.75

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM HIDARY, JACK A 1019 EAST 9TH STREET BROOKLYN, NY 11230 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM GOLDSCHMIDT, JONAH 1101 EAST 4TH STREET BROOKLYN, NY 11230 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM HIDARY, ABRAHAM J 1125 EAST 8TH STREET BROOKLYN, NY 11230 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM HIDARY, EDDIE J 1019 EAST 9TH STREET BROOKLYN, NY 11230 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-4-08

Date

Daytime Phone #