

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90077 037 ***150.00

DOCUMENT # M51055

1. Entity Name
H & G IMPORT, EXPORT INC.



Principal Place of Business
H & G IMPORT, EXPORT
2695 NW 56TH ST
FORT LAUDERDALE FL 33309
US

Mailing Address
15031 SW 9TH ST
SUNRISE FL 33326
US



2. Principal Place of Business

3. Mailing Address

2695 NW 56 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#53 A

City & State

City & State

FT. LAUDERDALE, FL

Zip

Country

Zip

Country

33309

US

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2807928**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DE GREGORY, HAROLD J.
15031 SW 9TH STREET
SUNRISE FL 33326

Name **DE GREGORY, HAROLD J**

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

9405 BRISTOL RIDGE COURT

City **WEST PALM BEACH FL** Zip Code **33411**

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 *Glenda De Gregory*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/4/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **DE GREGORY, HAROLD J.**
STREET ADDRESS **15031 SW 9TH ST**
CITY-ST-ZIP **SUNRISE FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DST** ☐ Delete
NAME **DE GREGORY, GLENDA G.**
STREET ADDRESS **15031 SW 9TH ST**
CITY-ST-ZIP **SUNRISE FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Glenda De Gregory*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/4/03 954-489-0141

CR2E034 (10/02)