FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P94000056779 (9)

H.G ENTERPRISES OF SOUTH MIAMI, INC.

Principal Place of Business

Mailing Address

FILED Apr 29 1998 8:00am Secretary of State



7990 SW 117TH AVE SUITE 137 7990 SW 117TH AVE SUITE 137 MIAMI FL 33183 MIAMI FL 33183 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0509732 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Ø 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GARCIA, HECTOR 7990 SW 117TH AVE SUITE 137 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33183** 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE PRESIDENT TITLE GARCIA, HECTOR Candida GARCIÓ 1.2 NAME NAME 7990 SW 117TH AVE SUITE 137 79905W117AUR 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33183** CITY-ST-ZIP 1.4 CITY - ST - ZIP Change DELETE ☐ Addition DS 2.1 TITLE **GARCIA. CANDIDA** NAME 2.2 NAME 7905W 117AVE 7990 SW 117TH AVE SUITE 137 2.3 STREET ADDRESS STREET ADDRESS MAMI FL 33183 7/4/1 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE Addition TITLE 3.1 TITLE PRESIDENT GARCIA, HECTOR J NAME 3.2 NAME 7990 SW 117TH AVE SUITE 137 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33183 3.4. CITY - ST- 2IP CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP 4.4 CITY - ST - ZIP DELETE ☐ Change ■ Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition 6.1 TITLE Change TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if chapted, or on an attag ment with an address

1100/60