

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90089 041 ***150.00

DOCUMENT # P97000026809

1. Entity Name

H.G. CONSTRUCTION AND CONSULTANTS, INC.

Principal Place of Business

7990 SW 117TH AVE. STE 135

MIAMI FL 33183

Mailing Address

7990 SW 117TH AVE. STE 137

MIAMI FL 33183



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12900 SW 128 ST

3. Mailing Address

12900 SW 128 ST

Suite, Apt. #, etc.

205

Suite, Apt. #, etc.

205

City & State

MIAMI

City & State

FLORIDA

4. FEI Number

65-0784428

Applied For

Not Applicable

Zip

33186

Country

DADE

Zip

33186

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, HECTOR J

7990 SW 117TH AVE. STE 137

MIAMI FL 33183

7. Name and Address of New Registered Agent

Name

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

12900 SW 128 ST #205

City **MIAMI**

FL

Zip Code

33186

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-28-02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **GARCIA, HECTOR J**
STREET ADDRESS **7990 SW 117TH AVE. STE 137**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE **S** ☐ Delete
NAME **GARCIA, CANDIDA**
STREET ADDRESS **3500 SW 112TH PLACE**
CITY-ST-ZIP **MIAMI FL 33185**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **12900 SW 128 ST #205**
CITY-ST-ZIP **MIAMI, FL 33186**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **12900 SW 128 ST #205**
CITY-ST-ZIP **MIAMI, FL 33186**

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-28-02 3052560777

CP2E034 (9/01)