

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023258

Entity Name: HG BACKFLOW INC.

FILED  
Apr 25, 2008  
Secretary of State

**Current Principal Place of Business:**

2119 W. COLUMBUS DR.  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2119 W. COLUMBUS DR.  
TAMPA, FL 33607

**New Mailing Address:**

FEI Number: 59-3501982

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GONZALEZ, HENRY JR  
2119 W. COLUMBUS DR.  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GONZALEZ, HENRY JR  
Address: 2119 W. COLUMBUS DR.  
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete  
Name: GONZALEZ, MARK H  
Address: 2119 W. COLUMBUS DR.  
City-St-Zip: TAMPA, FL 33607

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK GONZALEZ

D

04/25/2008

Electronic Signature of Signing Officer or Director

Date