Mailing Address 3830 W. 4TH AVE

DOCUMENT # P99000089684

H & G SANTA CRUZ CORPORATION

1. Entity Name

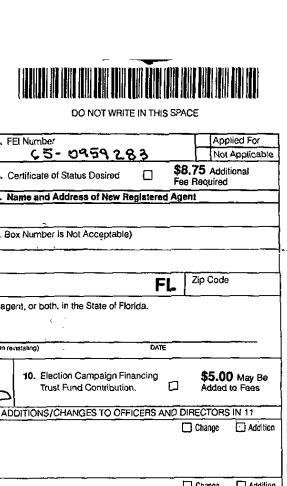
3830 W. 4TH AVE

HIALEAH FL 33012

Principal Place of Business

FILED

May 23, 2000 8:00 am Secretary of State 04-24-2000 90135 018 ***150.00



HALEAH FL 33012		HIALEAH FL 33012-4202									
2. Principal Pla	ace of Busin	ness	3. Mailing Address			-					
Suite, Apt. #	ŧ, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN	THI S SP	ACE		
City & State			City & State			4. FEI Number Applied For Applied For Not Applied by					
Zip Country			Zip	Zip Country		5. (Dertificate of Status Desired	\$	8.75 Addit		
	6. Name	and Address of Current F	Registered Agent		<u> </u>	7. N	lame and Address of New Regist	ered Ag	ent		
GARCIA, HECTOR 3830 W. 4TH, AVE HIALEAH FL 33012					Name						
					Street Address (P.O. Box Number is Not Acceptable)						
					City			FL	Zip Code		
8. The above	named enti	ty submits this statement for	the purpose of changing it	s register	ed office or regis	tered ag	ent, or both, in the State of Florida.				
							* '				
SIGNATURE _	Signature, types	or printed name of registered agent a	nd title if applicable (NO	TE: Registere	d Agent signature requ	ired when re	einstaling)	DATE			
Tax filing re		gible to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to@epartment of St				10. Election Campaign Financi. Trust Fund Contribution.	ng []		May Be to Fees	
11.	OFFICERS AND DIRECTORS					AC	DITIONS/CHANGES TO OFFICER	IS AND I	DIRECTORS	IN 11	
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STREET ADDRESS CITY-ST-ZIP]				REET ADDRESS TY-ST-ZIP						
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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:

4-17-00

Daytime Phone #