## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 28, 2008 08:00 AN Secretary of State

DOCUMENT # 851210  1. Entity Name NATIONAL FREIGHT, INC.				
Principal Place of Business 71 WEST PARK AVENUE VINELAND, NJ 08360	Mailing Address 71 WEST PARK AVENUE VINELAND, NJ 08360		-	
	<del></del>			
DO NOT WRI	TE IN THIS SPA	<b>CE</b>	01042008	No Chg-P
			4. FEI Number 21-0586	

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CR2E034 (11/05) Applied For

Not Applicable

				5. Certificate	e of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current Regis	itered Agent		l	,	•	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				NOT W	医减弱性 电电阻 化二氯甲烷	, , , , , , , , , , , , , , , , , , ,	
	named entity submits this statement for the plions of registered agent.	ourpose of changing its register	ed office or registe	ered agent, or be	oth, in the State of Flor	rida. I am familiar with, and acc	ept
SIGNATURE							
	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registere	d Agent signature require	ed when reinstating)	t ter entro	DATE ID GOOGLOSIO	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		5.00 May Be Ided to Fees		<del>0803003</del> -80008-003 150.0	0
10.	OFFICERS AND DIREC	CTORS	, ,		.! .		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BROWN, SIDNEY 71 WEST PARK AVENUE VINELAND, NJ		<i>a</i> , `				; ; ;
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DANIELS,KATHY 71 WEST PARK AVENUE VINELAND, NJ		ng et en ge	\$ \ 36 mgs	April 1		ا رو «ريايا»
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, IRWIN 201 BUTCHER ROAD WAXAHACHIE, TX			DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	CPD BROWN, BERNARD 71 WEST PARK AVE. VINELAND, NJ			<b>IN</b> .'	THIS SP	ACE	t í
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NICHOLS, GARY 71 WEST PARK AVE VINELAND, NJ						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP RASCHIHA, FRANK 71 WEST PARK AVENUE VINELAND, NJ 08360						*.*
12. I hereby of indicated	certify that the information supplied with this fi on this report or supplemental report is true a	ling does not qualify for the exe	emptions containe ture shall have the	nd in Chapter 11 same legal effe	9, Florida Statutes. I f	urther certify that the informational that I am an officer or direct	on tor

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 an other like empowered.

SIGNATURE:

PASCHILLA- ELECUTIVE UPICFO