


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006


FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 APR 10 AM 9:27

DOCUMENT # A05000000813 1. Entity Name HFDF HOLDING CO., LTD.	
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Principal Place of Business 9020 RANCHO DEL RIO DRIVE, STE. 125 NEW PORT RICHEY, FL 34655	Mailing Address 9020 RANCHO DEL RIO DRIVE, STE. 125 NEW PORT RICHEY, FL 34655
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

 01252006 Chg-LP CR2E003 (11/05)	
4. FEI Number 20-2751534	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DEEB, ALEX R 9020 RANCHO DEL RIO DRIVE, STE. 125 NEW PORT RICHEY, FL 34655	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P05000045224	STREET ADDRESS	
NAME	JHDF, INC.	CITY-ST-ZIP	
STREET ADDRESS	9020 RANCHO DEL RIO DRIVE, STE. 125		
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Alex R Deeb* **By Alex R Deeb, President**

727-376-6831

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

STAPLE CHECK HERE