## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000004728

Address:

City-St-Zip:

Entity Name: HOEGH AUTOLINERS INC

FILED Jun 30, 2005 Secretary of State

•					
Current Principal Place of Business:			New Principal Place of Business:		
<b>JERICHO</b>	OADWAY ATRIUM , NY 11753				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
<b>JERICHO</b>	OADWAY ATRIUM , NY 11753				
FEI Number	: 13-2733940	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
BLOUNT I JACKSON	É RAWLS BLY ISLAND TERM IVILLE, FL 32	1INAL 226 US	vurness of changing its registers	ad affice or registered agent, or both	
	e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P ( BUTCHER, JA 27 MILL DAM SMITHTOWN,	ROAD	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	LYNGAS, PER	SVEIEN 7, BOX 2596 SOLLI	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( WINOGRAD, F 7 GENTORE C EDISON, NJ (	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KRISTOFFER	) Delete SEN, ANDERS N SVEIEN 7, PO BOX 2596 SOLLI )-023 NO	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D ( JENSEN, CHA	) Delete RLES	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address: City-St-Zip:

SIGNATURE: JAMES E. BUTCHER PRES 06/30/2005

WERGELANDSVEIEN 7. PO BOX 2596 SOLLI

OSLO,, NO N0-023 NO