2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000095033

1. Entity Name

HF TRANSPORTATION SERVICES, INC.



Principal Place of Business

57**89** NW 7 ST STE 234 MIAMI, FL 33126

Mailing Address

57**2₽** NW 7 ST STE 234 MIAMI, FL 33126

FILED Apr 12, 2006 8:00 am Secretary of State

04-12-2006 90086 029 ***150.00



01102006

No Chg-P

CR2E034 (11/05)

4. FEI Number 57-1184799

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

-- 6. Name and Address of Current Registered Agent-

FLOREZ. HECTOR

5727 NW 7TH ST, SUITE 234 MIAMI, FL 33126		IN THIS SPACE
8. The above named entity submits this statement for the the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little		or registered agent, or both, in the State of Florida. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRE- TITLE PSTD FLOREZ, HECTOR STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33126 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CIORS	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		IN THIS SPACE
NAME STREET ADDRESS C/TY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP	filing doop not qualify for the exemptions	contained 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 signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empoweres 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 all other like empowered.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR