2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000003536

1. Entity Name

JFJ FREIGHT FORWARDERS INC.



Principal Place of Business

13100 NW 113TH AVE. RD.

SUITE 2

MIAMI, FL 33178

Mailing Address

13100 NW 113TH AVE. RD.

SUITE 2

DO NOT WRITE IN THIS SPACE

MIAMI, FL 33178



01102007

No Chg-P

CR2E034 (11/05)

FILED

Jan 25, 2007 08:00 AM Secretary of State

4. FEI Number 65-0816758 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name a	nd Address	of Curren	t Registered	Agent

H&C PROFESSIONAL SERVICES,INC. 3500 NORTH STATE ROAD 7

SUITE 199

LAUDERDALE LAKES, FL 33309

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the priors of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. (NOTE Registered	Agent signature	required when reinstating)	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			ing []	\$5.00 May Be Added to Fees	÷		
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON-ALLEN, JUNETIDE 19060 SW 65TH STREET PEMBROKE PINES, FL 33332						
TITLE NÁME STREET ADDRESS CITY-ST-ZIP	V SHARPE, NEVILLE A JR 19060 SW 65TH STREET PEMBROKE PINES, FL 33332				U00000603066 01/26/07-80116-019 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,					
12. I hereby certify that the information supplied with this filling does 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 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 10 or Block 11 if changed, or on an attachment without address, with all other like empowered.							