-2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 17, 2007 08:00 AM **DOCUMENT # V62042 Secretary of State** 1. Entity Name A HI-LAND TRANSFER & STORAGE, INC. Principal Place of Business Mailing Address 2630-A TWILIGHT AVE 2630-A TWILIGHT AVE PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 01102007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2966590 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PIMENTEL, JOSEPH L DO NOT WRITE 5855 JOSEPH RD PANAMA CITY, FL. 32404 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title il applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. , Added to Fees OFFICERS AND DIRECTORS 10. TITLE PIMENTEL, JOSEPH L NAME U00000588895 5855 JOSEPH RD. STREET ADDRESS 01/17/07-80091-006 158.00 CITY-ST-ZIP PANAMA CITY, FL 32404 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADORESS CITY-ST-ZIP

12. 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 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 with an address, with all other like empowered.

SIGNATURE:

TITL F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS