

FILED
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Secretary of State

05-14-2007 90081 018 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # G39832

1. Entity Name
IT I, INTER-TRADE INDUSTRIAL, INC.



Principal Place of Business
**2828 CORAY WAY
308
MIAMI, FL 33145-3214 US**

Mailing Address
**2828 CORAY WAY
308
MIAMI, FL 33145-3214 US**

66019910



04302007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2303865

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FERNANDEZ, RAFAEL A
2828 CORAL WAY, STE 308
MIAMI, FL 33145-3214**

**DO NOT WRITE
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 if applicable

(NOTE: Registered Agent signature required when remitting)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	FERNANDEZ, RAFAEL A
STREET ADDRESS	2828 CORAL WAY STE 308
CITY- ST- ZIP	MIAMI, FL 331453214
TITLE	VTD
NAME	MIELEWCZYK DE GLOC, BEATA EWA
STREET ADDRESS	9655 S. DXIE HWY., STE 116
CITY- ST- ZIP	MIAMI, FL 33158
TITLE	VTD
NAME	MIELEWCZYK, DE GLOC B EWA
STREET ADDRESS	2828 CORAL WAY STE 308
CITY- ST- ZIP	MIAMI, FL 331453214
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-07 305 444 1886

Date

Daytime Phone