2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 330428

FILED Jul 09, 2009 Secretary of State

Entity Name: INTERNATIONAL TRUCKING & RIGGING CO., INC.

	rincipal Place	OI DUSINESS.	New Principal Place	or Business.
1320 NW IIAMI, FL				
urrent M	lailing Addres	ss:	New Mailing Address	s:
1320 NW IIAMI, FL				
El Number:	: 59-1209709	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of C	Current Registered Agent	Name and Address o	of New Registered Agent:
IPP, RICI 1320 NW	HARD L. SR.			
IAMI, FL he above	33178 US	submits this statement for tl	ne purpose of changing its registered	d office or registered agent, or both,
llAMI, FL he above	33178 US named entity s e of Florida. RE:			d office or registered agent, or both,
IIAMI, FL he above the State	33178 US named entity s e of Florida. RE:	submits this statement for the		d office or registered agent, or both, Date
IIAMI, FL he above the State IGNATUF	anamed entity see of Florida. RE: Electron ce with s. 607.19	nic Signature of Registered 3(2)(b), F.S., the corporation di	Agent	
he above the State GNATUF accordan ection Car	anamed entity see of Florida. RE: Electron ce with s. 607.19	nic Signature of Registered 3(2)(b), F.S., the corporation di g Trust Fund Contribution ().	Agent d not receive the prior notice.	
ilAMI, FL he above the State IGNATUR accordan ection Car	anamed entity see of Florida. RE: Electron ce with s. 607.19 mpaign Financing S AND DIREC	nic Signature of Registered 3(2)(b), F.S., the corporation di g Trust Fund Contribution (). TORS: Delete D L. SR. RD.	Agent d not receive the prior notice.	Date
he above the State IGNATUR accordan ection Car FFICERStee: ame: ddress:	anamed entity see of Florida. RE: Electron ce with s. 607.19 mpaign Financing S AND DIREC PD () KIPP, RICHARD 14830 LEWIS F MIAMI LAKES,	nic Signature of Registered 3(2)(b), F.S., the corporation di g Trust Fund Contribution (). TORS: 1 Delete 0 L. SR. RD. FL 33014 1 Delete 0 L. JR. DN PL.	Agent d not receive the prior notice. ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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

SIGNATURE: THERESA KIPP S/D 07/09/2009