## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 479248**

FILED Apr 15, 2008 Secretary of State

Entity Name: INTERTEX TRADING CORP., INC.

Current Principal Place of Business:		New Principal Place of Business:		
549 W 47TI MIAMI BEA	H ST CH, FL 33140	US		
Current Ma	ailing Address	::	New Mailing Addres	s:
PO BOX 40 MIAMI BEA	2586 CH, FL 33140	US		
El Number:	59-1609902	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	of New Registered Agent:
	ALEXANDER T.			
ИIAMI BEAι Γhe above ι	CH, FL 33140 named entity su	US ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
MIAMI BEAG The above in the State	CH, FL 33140 named entity su of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
MIAMI BEAG The above in the State	CH, FL 33140 named entity su of Florida. E:			ed office or registered agent, or both,
MIAMI BEAG The above in the State	cH, FL 33140 named entity su of Florida. E:Electronic	ubmits this statement for the p		
The above in the State SIGNATUR	cH, FL 33140 named entity su of Florida. E:Electronic	ubmits this statement for the position of the	ent	
MIAMI BEAG The above in the State BIGNATUR	CH, FL 33140  named entity stoof Florida.  E: Electronic  paign Financing  AND DIRECT	ubmits this statement for the position of Registered Agriculture of Registered Agricultures Fund Contribution ( ).  ORS: Delete	ent	Date
MIAMI BEAGE The above in the State SIGNATUR Election Cam DFFICERS Title: Jame:	CH, FL 33140  named entity stoof Florida.  E: Electronic  paign Financing  AND DIRECT  VD () I  SOJCHER, JOAN 4101 PINE TREE MIAMI BEACH, F	ubmits this statement for the particle Signature of Registered Agranust Fund Contribution ( ).  ORS: Delete I DRIVE L 33140 Delete ANDER ST.	ent  ADDITIONS/CHANG  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: ALEXANDER ROSNER PD 04/15/2008