## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L32329

FILED Apr 23, 2009 Secretary of State

Entity Name: INTERNATIONAL TRADE COMPANY OF JACKSONVILLE, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	INGTON EXPRI IVILLE, FL 322			
urrent Mailing Address:		New Mailing Address:		
.O. BOX ACKSON	19618 IVILLE, FL 3224	45 US		
El Number	: 59-2980953	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
200 ARÍLI	AHMED S INGTON EXPRI IVILLE, FL 322			
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
the Stat	e of Florida. RE:	ubmits this statement for the		ed office or registered agent, or both,  Date
the Stat	e of Florida.  RE: Electroni			
the State	e of Florida.  RE: Electroni	ic Signature of Registered Ag  Trust Fund Contribution ( ).	pent	
the State	e of Florida.  RE: Electroni  mpaign Financing  S AND DIRECT  DP ()  NEENIA, AHMEE	ic Signature of Registered Ag Trust Fund Contribution ( ). TORS: Delete DON EXPRESSWAY	pent	Date
the State IGNATU Rection Car OFFICER tte: ame: ddress:	e of Florida.  RE: Electroni  mpaign Financing  S AND DIRECT  DP ()  NEENIA, AHMED 6200 ARLINGTO JACKSONVILLE  VST () NINYA, SAMI	ic Signature of Registered Ag Trust Fund Contribution ( ).  FORS:  Delete Do N EXPRESSWAY  FL 32211  Delete Do N EXPESSWAY	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: AHMED NEENIA PRES 04/23/2009