

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L33419**

1. Entity Name  
**INTRATEX ENTERPRISES, INC.**



Principal Place of Business  
**9400 S. DADELAND BLVD  
MIAMI, FL 33156 US**

Mailing Address  
**9400 S. DADELAND BLVD.  
605  
MIAMI, FL 33156 US**



**DO NOT WRITE IN THIS SPACE**

04092005 No Chg-P CR2E034 (10/03)

4. FEI Number **65-0156368** Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**NORMAN A. ELIOT & CO.  
9400 SOUTH DADELAND BLVD., SUITE 605  
MIAMI, FL 33156**

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME BLATTNER, DAVID  
STREET ADDRESS 9400 S. DADELAND BLVD STE 605  
CITY - ST - ZIP MIAMI, FL 33156

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U00000354792  
05/03/05-80121-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**

*David Blattner*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**DAVID BLATTNER**

Date

Daytime Phone #

**469605**