

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 13, 2006 08:00 AM**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                           |                                                                                                                     |                                                                                                                                                                                            |                                                        |                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # M36185</b><br>1. Entity Name<br><b>INTERAMERICA TRADERS GROUP, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                           |                                                                                                                     |                                                                                                                                                                                            |                                                        |                                                                   |
| Principal Place of Business<br><b>7801 NW 67 STREET</b><br><b>MIAMI, FL 33166 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                           |                                                                                                                     | Mailing Address<br><b>7801 NW 67 STREET</b><br><b>MIAMI, FL 33166 US</b>                                                                                                                   |                                                        |                                                                   |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |                                                                                                                     | 3. Mailing Address                                                                                                                                                                         |                                                        |                                                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           |                                                                                                                     | Suite, Apt. #, etc.                                                                                                                                                                        |                                                        |                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                           |                                                                                                                     | City & State                                                                                                                                                                               |                                                        |                                                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           | Country                                                                                                             | Zip                                                                                                                                                                                        |                                                        | Country                                                           |
| <div style="text-align: right;">           01062006    Chg-P    CR2E034 (11/05)         </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |                                                                                                                     |                                                                                                                                                                                            |                                                        |                                                                   |
| 4. FEI Number<br><b>59-2761781</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                           |                                                                                                                     |                                                                                                                                                                                            | Applied For<br><input type="checkbox"/> Not Applicable |                                                                   |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                           |                                                                                                                     |                                                                                                                                                                                            | <b>\$8.75 Additional Fee Required</b>                  |                                                                   |
| 6. Name and Address of Current Registered Agent<br><br><b>NAJMAN, WOLF</b><br><b>3350 WEST ACT</b><br><b>HIALEAH, FL 33812</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |                                                                                                                     | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="text-align: right;"> <b>FL</b>    Zip Code         </div> |                                                        |                                                                   |
| 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 _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                           |                                                                                                                     |                                                                                                                                                                                            |                                                        |                                                                   |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                                                                            |                                                        |                                                                   |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                           |                                                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                                               |                                                        |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | D<br>NAJMAN, WOLF<br>7801 NW 67 STREET<br>MIAMI, FL 33166 | <input type="checkbox"/> Delete                                                                                     |                                                                                                                                                                                            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP         | U00000433123<br>02/24/06-80003-014 158.75                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           | <input type="checkbox"/> Delete                                                                                     |                                                                                                                                                                                            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP         | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           | <input type="checkbox"/> Delete                                                                                     |                                                                                                                                                                                            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP         | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           | <input type="checkbox"/> Delete                                                                                     |                                                                                                                                                                                            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP         | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           | <input type="checkbox"/> Delete                                                                                     |                                                                                                                                                                                            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP         | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           | <input type="checkbox"/> Delete                                                                                     |                                                                                                                                                                                            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP         | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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, without other like empowered. |                                                           |                                                                                                                     |                                                                                                                                                                                            |                                                        |                                                                   |
| <b>SIGNATURE:</b> _____<br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                           |                                                                                                                     |                                                                                                                                                                                            | Date <b>1/24/06</b> Daytime Phone #                    |                                                                   |