

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P02000075207

1. Entity Name  
INVESTTRAN DATA EXCHANGE, INC.



Principal Place of Business

11098 BISCAYNE BLVD.  
SUITE 403  
MIAMI, FL 33161

Mailing Address

11098 BISCAYNE BLVD.  
SUITE 403  
MIAMI, FL 33161

**DO NOT WRITE IN THIS SPACE**



02132004 No Chg-P CR2E034 (10/03)

4. FEI Number

55-0804706

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DADE CORPORATE SERVICES, INC.  
2300 CORAL WAY  
SUITE 103  
MIAMI, FL 33145

**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 *David Williams* PRESIDENT 4/29/04  
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, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME SINAI, JOSE  
STREET ADDRESS 11098 BISCAYNE BLVD., SUITE 403  
CITY-ST-ZIP MIAMI, FL 33161

TITLE D  
NAME IASLOVITS, LAUREN  
STREET ADDRESS 11098 BISCAYNE BLVD., SUITE 403  
CITY-ST-ZIP MIAMI, FL 33161

TITLE D  
NAME SINAI, DAVID  
STREET ADDRESS 11098 BISCAYNE BLVD., SUITE 403  
CITY-ST-ZIP MIAMI, FL 33161

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

500035794925  
05/10/04--01024--023 \*\*158.75

*4/29/04*

**DO NOT WRITE  
IN THIS SPACE**

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

*Jose Sinai* JOSE SINAI D.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/04 (305) 854-1040