

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000107343

**FILED**  
**Oct 22, 2004**  
**Secretary of State**

**Entity Name:** INTERNATIONAL TRADE UNLIMITED CORPORATION

**Current Principal Place of Business:**

P.O. BOX 7353  
CLEARWATER, FL 33758

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7353  
CLEARWATER, FL 33758

**New Mailing Address:**

**FEI Number:** 02-0649186

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KILANI, MADALINA  
55555 COLLINS AVENUE #16A  
MIAMI BEACH, FL 33140 US

**Name and Address of New Registered Agent:**

ALHASSAN, ATEF A  
P.O. BOX 7353  
CLEARWATER, FL 33758 US

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.

SIGNATURE: ATEF A. ALHASSAN

10/22/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ALHASSAN, NEHAD A  
Address: 11801 NORTH 50TH STREET, APT. H-21  
City-St-Zip: TAMPA, FL 33617

Title: DVT ( ) Delete  
Name: ALHASSAN, SAMER A  
Address: 910 ANCHORAGE LN  
City-St-Zip: PALM HARBOR, FL 34685

Title: DS ( ) Delete  
Name: MADALINA, KILANI  
Address: 55555 COLLINS AVENUE #16 A  
City-St-Zip: MIAMI BEACH, FL 33140

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPT (X) Change ( ) Addition  
Name: ALHASSAN, NEHAD A  
Address: 11801 NORTH 50TH STREET, APT. H-21  
City-St-Zip: TAMPA, FL 33617

Title: DVPS (X) Change ( ) Addition  
Name: ALHASSAN, SAMER A  
Address: 1344 PINE RIDGE CIRCLE EAST - UNIT D3  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: DCO (X) Change ( ) Addition  
Name: ALHASSAN, ATEF A  
Address: 1344 PINE RIDGE CIRCLE EAST - UNIT D3  
City-St-Zip: TARPON SPRINGS, FL 34689

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SAMER A. ALHASSAN

DVPS

10/22/2004

Electronic Signature of Signing Officer or Director

Date