FILED
Apr 21, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000091605

1. Entity Name
ITINEA CORP.

Principal Place of Business	Mailing Address
100 N. BISCAYNE BLVD 2904 MIAMI, FL 33132	100 N. BISCAYNE BLVD 2904 MIAMI, FL 33132

DO NOT WRITE IN THIS SPACE

01282005 No Chg-F CR2E034 (10/03)

4. FEI Number
20-0204571
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BENICHAY, BRIGITTE I
100 N.BISCAYNE BLVD
2904
MIAMI, FL 33132

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $400.00

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

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	CLEVENOT, ADRIAN
STREET ADDRESS	100 N. BISCAYNE BLVD
CITY-ST-ZIP	MIAMI, FL 33132
TITLE	P
NAME	CLEVENOT, AXEL
STREET ADDRESS	100 N. BISCAYNE BLVD
CITY-ST-ZIP	MIAMI, FL 33132
TITLE	V
NAME	CHAWVAL, BURGIN
STREET ADDRESS	100 N. BISCAYNE BLVD
CITY-ST-ZIP	MIAMI, FL 33132
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000032046
04/21/05-80101-009 150.00

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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)(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: [signature] 4/13/05 305-379-7202
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL SIGNING OR DIRECTOR — DATE — Daytime Phone #