

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Feb 08, 2008 8:00 am
Secretary of State**

02-08-2008 90034 015 ***150.00

DOCUMENT # P04000109098		
1. Entity Name INTERNATIONAL GREASE TRAP, CORP.		

Principal Place of Business
7931 W 31 CT
HIALEAH, FL 33018

Mailing Address

7931 W 31 CT
HIALEAH, FL 33018

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4 UUW
4. FEI Number
20-1418195

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

TOLEDO, PEDRO
7931 W 31 CT
HIALEAH, FL 33018

Name

Street Address (P.O. Box Number Is Not Acceptable)

City

FL Zip Code

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, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE: P
NAME: TOLEDO, PEDRO
STREET ADDRESS: 7931 W 31 CT
CITY-ST-ZIP: HIALEAH, FL 33018

Delete

TITLE: S
NAME: TOLEDO, TERESA
STREET ADDRESS: 7931 W 31 CT
CITY-ST-ZIP: HIALEAH, FL 33018

Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

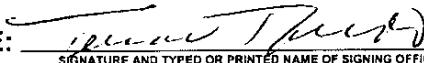
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

Change 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, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/08 (305) 826 1773
Daytime Phone #