


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90235 034 ***150.00

DOCUMENT # P14961 1. Entity Name ICAHN ENTERPRISES G.P. INC.					
Principal Place of Business 445 HAMILTON AVE. 1210 WHITE PLAINS, NY 10601-1833 US			Mailing Address 445 HAMILTON AVE. 1210 WHITE PLAINS, NY 10601-1833 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 13-3413965	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHEA, PETER K C/O AREP 767 5TH AVE. STE. 4700 NEW YORK, NY 10153 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition c/o Icahn Enterprises LP 767 5th Ave. Ste. 4700 New York, NY 10153	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTS SALDARELLI, JOHN P C/O AREP 767 5TH AVE. STE 4700 WHITE PLAINS, NY 106011833 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VS c/o Icahn Enterprises LP 445 Hamilton Ave. Ste. 1210 White Plains, NY 10601	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SKOBE, ANDREW C/O AREP 767 5TH AVE., STE 4700 NEW YORK, NY 10153 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition c/o Icahn Enterprises LP 142 W 57th St. 5th Floor New York, NY 10019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C ICAHN, CARL C 767 5TH AVE 47TH FL NEW YORK, NY 10153 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WASSERMAN, JACK G C/O AREP 767 5TH AVE., STE 4700 NEW YORK, NY 10153 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition c/o Icahn Enterprises LP 767 5th Ave. Ste. 4700 New York, NY 10153	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEIDESDORF, WILLIAM A C/O AREP 767 5TH AVE., STE 4700 NEW YORK, NY 10153 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition c/o Icahn Enterprises LP 767 5th Ave. Ste. 4700 New York, NY 10153	
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: <i>John P. Saldarelli</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			3/27/08 (914) 614-7000 Date Daytime Phone #		