2004 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P99000004172

1. Entity Name INTERARTEX CORPORATION

Mailing Address

Principal Place of Business 10621 SW 128 STREET MIAMI, FL 33176

10621 SW 128 STREET MIAMI, FL 33176

FILED Apr 07, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

No Chg-P 03132004 CR2E034 (10/03) 4. FEI Number 65-0890218 Applied For

Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

GUILLEN, JAIME A 10621 SW 128 ST. MIAMI, FL 33178

SIGNATURE:

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 Signature, typed or printed name of registered agent and title if applicable. DNDTE. Registered				required when reinstating)	DATE
FILE NOWII! FEE IS \$150.00 9. Election Campaign Finan After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.			cing 📙	\$5.00 May Be Added to Fees	11000000106014 04/07/04-80049-018 150.00
10. OFFICERS AND DIRECTORS					And the party of the to the control that the party of the
TITLE NAME STREET ADDRESS CRY+SI-ZIP	PD GUILLEN, JAIME A 10621 SW 128 ST, MIAMI, FL 33176				
TITLE NAME STREET ADDRESS CRY+ST-ZIP	SD GUILLEN, JACQUELINE A 10621 SW 128 ST. MIAMI, FL 33176				
TITLE NAME STREET ADDRESS CHTY-ST-ZIP				DO	NOT WRITE
ritle name street address city-st-zip		_		IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,				
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. TAINE A. GOILLEN					

PRESIDENT