## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Apr 10, 2007 08:00 Al Secretary of State **DOCUMENT # P000000000061** INTERSTATE CONSULTANTS, INC. Principal Place of Business Mailing Address 1170 RIVIERA DR NE 1170 RIVIERA DR NE PALM BAY, FL 32905 PALM BAY, FL 32905 No Chg-P CR2E034 (11/05) 04042007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3617751 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ROBLES, LUISA 1170 RIVIERA DR NE PALM BAY, FL 32905 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE ROBLES, CENOBIO NAME 1170 RIVIERA DR NE STREET ADDRESS U000000696788 CITY-ST-ZIP PALM BAY, FL 32905 04/18/07-80012-004 158.79 ROBLES, LUISA NAME STREET ADDRESS 1170 RIVIERA DR NE PALM BAY, FL 32905 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITI F NAME STREET ADDRESS CITY-ST-ZIP

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 receives 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 attachme t with an address, with all-other like empowered.

SIGNATURE:

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