2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000092867

Entity Name: ADVISIA MANAGEMENT CONSULTING CORPORATION

Current Principal Place of Business:	**New Principal Place of Business:**
225 29 ALCAZAR AVE CORAL GABLES, FL 33134 US	

Current Mailing Address:	**New Mailing Address:**
225 29 ALCAZAR AVE CORAL GABLES, FL 33134 US	

FEI Number: 26-3613437   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
DUVEKOT CORPORATION 8671 NW 56TH STREET DORAL, FL 33166 US	

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.

SIGNATURE: _____

                    Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD
Name: MAAL, MIGUEL
Address: 8671 NW 56TH STREET SUITE B10
City-St-Zip: DORAL, FL 33166 US

Title: VPS
Name: MAAL, MIGUEL
Address: 8671 NW 56TH STREET SUITE B10
City-St-Zip: DORAL, FL 33166 US

Title: VPD
Name: FERNANDES, MARCIO
Address: 8671 NW 56TH STREET SUITE B10
City-St-Zip: DORAL, FL 33166 US

Title: TS
Name: FERNANDES, MARCIO
Address: 8671 NW 56TH STREET SUITE B10
City-St-Zip: DORAL, FL 33166 US

Title: D
Name: LAUDARES, ALESSANDRO
Address: 8671 NW 56TH STREET SUITE B10
City-St-Zip: DORAL, FL 33166 US

Title: D
Name: NOVAES, LUIZ
Address: 8671 NW 56TH STREET SUITE B10
City-St-Zip: DORAL, FL 33166 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MIGUEL MAAL   P   04/29/2010
_____
Electronic Signature of Signing Officer or Director   Date