2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000038917

Entity Name: PROCESSMAP CORPORATION

FILED Jun 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
600 NORT 450	H PINE ISLAN	D ROAD			
	ON, FL 33324				
Current M	ailing Addres	ss:	New Mailing Address	New Mailing Address:	
P.O.BOX 2 WESTON,					
FEI Number:	: 65-1011969	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 US		450	600 N. PINE ISLAND ROAD		
The above in the State	named entity s of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: DAVE RATH			06/30/2008		
	Electror	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PC () RATH, DEBASI P.O.BOX 2676 WESTON, FL 3	70`	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VS () GARIMELLA, J. P.O.BOX 2676 WESTON, FL	70	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () PIERCE, ALDE P.O.BOX 2676 WESTON, FL	70	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () MONZO, GREG P.O.BOX 2676 WESTON, FL :	70	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	V () SEPANSKI, BR P.O.BOX 2676		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

City-St-Zip:

City-St-Zip: WESTON, FL 33324