

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000071374

**FILED**  
**Mar 24, 2009**  
**Secretary of State****Entity Name:** CONSUL-TECH SURVEYING & MAPPING INC.**Current Principal Place of Business:**3141 COMMERCE PARKWAY  
MIRAMAR, FL 33025**New Principal Place of Business:****Current Mailing Address:**3141 COMMERCE PARKWAY  
MIRAMAR, FL 33025**New Mailing Address:**6100 BLUE LAGOON DRIVE  
SUITE 300  
MIAMI, FL 33126**FEI Number:** 65-1123253**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MURAI WALD BIONDO & MORENO PA  
2 ALHAMBRA PLAZA, PENTHOUSE 1B  
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: DS ( ) Delete  
Name: GARGANTA, ANDRES  
Address: 9933 SW 21 ST  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: MALLOL, CARLOS  
Address: 7361 SW 123RD PLACE  
City-St-Zip: MIAMI, FL

Title: DP ( ) Delete  
Name: PLATT, MICHAEL  
Address: 424 LLAMA COURT  
City-St-Zip: APOPKA, FL

Title: V ( ) Delete  
Name: QUARTEL, JAMES  
Address: 638 LASALLE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V (X) Delete  
Name: BRUCE, SELVIN  
Address: 16110 SW 154TH AVENUE  
City-St-Zip: MIAMI, FL 33187

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: BRUCE, SELVIN  
Address: 16110 SW 154TH AVENUE  
City-St-Zip: MIAMI, FL 33187

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: CARLOS MALLOL

TD

03/24/2009

Electronic Signature of Signing Officer or Director

Date