

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 11, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000027767

1. Entity Name  
INTERACTIVOS CONSULTORES, CORP.



Principal Place of Business  
15411 SW 39 TER  
MIAMI, FL 33185

Mailing Address  
15411 SW 39 TER  
MIAMI, FL 33185



01072008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
56-2336207

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

CELIS, IRIS  
15411 SW 39 TERR  
MIAMI, FL 33185

**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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

U00000780529  
01/14/08-80026-007 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	MUCI, SALOMON
STREET ADDRESS	15411 SW 39 TER
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	D
NAME	CELIS, IRIS
STREET ADDRESS	15411 SW 39 TER
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	D
NAME	RACHO, ELIAS
STREET ADDRESS	15411 SW 39 TER
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	D
NAME	VALERO, MARCOS
STREET ADDRESS	15411 SW 39 TER
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	D
NAME	MALDONADO, RAFAEL
STREET ADDRESS	15411 SW 39 TER
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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 information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/09/08 305-4853884