

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000058878

Entity Name: MAPCORP CONSULTING INC

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4162 SABAL RIDGE CIRCLE  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

4162 SABAL RIDGE CIRCLE  
WESTON, FL 33331

**New Mailing Address:**

FEI Number: 26-2814598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OLMOS, CARLOS  
11745 W ATLANTIC BLVD  
1707  
CORAL SPRINGS, FL 33071 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: P  
Name: OLMOS, CARLOS  
Address: 11745 W ATLANTIC BLVD STE 1707  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP  
Name: PASTRANA, MARIA A  
Address: 11745 W ATLANTIC BLVD STE 1707  
City-St-Zip: CORAL SPRINGS, FL 33071

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: CO

P

02/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date