

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000037604

Entity Name: THE CONSILIVM, INC.

FILED  
Oct 05, 2009  
Secretary of State

## Current Principal Place of Business:

3030 E SEMORAN BLVD  
SUITE 108  
APOPKA, FL 327035909 US

## New Principal Place of Business:

## Current Mailing Address:

3030 E SEMORAN BLVD  
SUITE 108  
APOPKA, FL 327035909 US

## New Mailing Address:

FEI Number: 59-3408131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANDARA, MICHELE  
362 CRISTAL RIDGE WAY  
LAKE MARY, FL 32746 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: MICHELE MANDARA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MANDARA, MICHELE  
Address: 362 CRISTAL RIDGE WAY  
City-St-Zip: LAKE MARY, FL 32746 US

Title: VP ( ) Delete  
Name: BARBA, ROBERTO  
Address: 269 Highbrooke Blvd.  
City-St-Zip: OCOEE, FL 347614638 US

Title: S ( ) Delete  
Name: BARBA, PAQUALE  
Address: 566 ZACHARY DR  
City-St-Zip: APOPKA, FL 327122383 US

Title: T ( ) Delete  
Name: MANDARA, SALVATORE  
Address: 8357 BAYWOOD VISTA DRIVE  
City-St-Zip: ORLANDO, FL 328106626 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MICHELE MANDARA

P

10/05/2009

Electronic Signature of Signing Officer or Director

Date