## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000068374

Entity Name: MAPA CONSULTING INC.

FILED Apr 19, 2004 Secretary of State

230D EAST DESOTO STREET 4417 13TH STREET

CLERMONT, FL 34711 #342

ST CLOUD, FL 34769 US

Current Mailing Address: New Mailing Address:

230D EAST DESOTO STREET 4417 13TH STREET

CLERMONT, FL 34711 #342

ST CLOUD, FL 34769 US

FEI Number: 59-3402491 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARIBAY, JUAN J
3501 INVERRARY BLVD
GARIBAY, JUAN J
4417 13TH STREET #342

#604 # 342

LAUDERHILL, FL 33319 US ST CLOUD, FL 34769 US

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: 04/19/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 GARIBAY, JUAN
 Name:
 GARIBAY, JUAN

 Address:
 230D EAST DESOTO STREET
 Address:
 4417 13TH STREET #342

City-St-Zip: CLERMONT, FL 34711 City-St-Zip: ST CLOUD, FL 34769 US

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: GARIBAY, JUDITH R Name: GOSS, SANDRA

 Name:
 GARIBAY, JODITH R
 Name:
 GOSS, SANDRA

 Address:
 230 D EAST DESOTO STREET
 Address:
 7080 BIG BEND DRIVE

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 ST CLOUD, FL 34771

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MON, PABLO
 Name:

 Address:
 221 ARAGON AVE
 Address:

 City-St-Zip:
 CORAL GABLES, FL
 City-St-Zip:

Title: O (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GOSS, SANDRA
 Name:

 Address:
 7025 BIG BEND DR
 Address:

 City-St-Zip:
 ST CLOUD, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUAN J GARIBAY PRES 04/19/2004