## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108917 Entity Name: MAPWISE INC.

**Current Principal Place of Business:** 

5683 SW ORCHID BAY DR

PALM CITY, FL 34990

**Current Mailing Address:** 

2740 SW MARTIN DOWNS BLVD.

#416

PALM CITY. FL 34990 US

FEI Number: 77-0702155 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

5683 SW ORCHID BAY DR PALM CITY, FL 34990 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:

Electronic Signature of Registered Agent

Date

**FILED** May 01, 2013

**Secretary of State** 

CC9356276764

## Officer/Director Detail:

**PRESIDENT** Title Name MAY, BRIAN

Address 5683 SW ORCHID BAY DR City-State-Zip: PALM CITY FL 34990

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.

**PRESIDENT** 05/01/2013 SIGNATURE: BRIAN MAY