

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090823

Entity Name: MAP - IT SOLUTIONS, INC.

FILED
Apr 14, 2011
Secretary of State

Current Principal Place of Business:

8510 SOUTH STEPHANIE LANE
TEMPE, AZ 852045243 US

New Principal Place of Business:

Current Mailing Address:

8510 SOUTH STEPHANIE LANE
TEMPE, AZ 852045243 US

New Mailing Address:

FEI Number: 20-0173752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, THOMAS A
54021 JODI LANE
NONE
CALLAHAN, FL 320118569 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: DPST
Name: APPACHU, BALLACHANDA
Address: 8510 SOUTH STEPHANIE LANE
City-St-Zip: TEMPE, AZ 852845243 US

Title: DS
Name: BLAIR, THOMAS A
Address: 54021 JODI LN. @ P O BOX 814
City-St-Zip: CALLAHAN, FL 320110814 US

Title: NONE
Name: NONE, NONE
Address: NONE
City-St-Zip: CALLAHAN, FL 32011 US

Title: NONE
Name: NONE, NONE
Address: NONE
City-St-Zip: CALLAHAN, FL 32011 US

Title: NONE
Name: NONE, NONE
Address: NONE
City-St-Zip: CALLAHAN, FL 32011 US

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: APPACHU

DPST

04/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date