

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 829357

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: DATACARD CORPORATION

## Current Principal Place of Business:

11111 BREN ROAD WEST  
MINNEAPOLIS, MN 553439015 US

## New Principal Place of Business:

## Current Mailing Address:

11111 BREN ROAD WEST  
MINNEAPOLIS, MN 553439015 US

## New Mailing Address:

FEI Number: 41-0950297

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

## 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: HATIM, TYABJI  
Address: 28130 STORY HILL LANE  
City-St-Zip: LOS ALTOS HILLS, CA 94022

Title: S ( ) Delete  
Name: SNOOK, ANDREA  
Address: 3725 HUNTINGTON AVE  
City-St-Zip: ST LOUIS PARK, MN 55416

Title: PCO ( ) Delete  
Name: JOHNSON, JEROME E  
Address: 6130 BERKSHIRE LANE NORTH  
City-St-Zip: PLYMOUTH, MN 55446

Title: V ( ) Delete  
Name: DAVENPORT, LOU  
Address: 3521 45TH AVENUE SOUTH  
City-St-Zip: MINNEAPOLIS, MN 55406

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PCO (X) Change ( ) Addition  
Name: HATIM, TYABJI  
Address: 28130 STORY HILL LANE  
City-St-Zip: LOS ALTOS HILLS, CA 94022

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LOU DAVENPORT

V

04/19/2004

Electronic Signature of Signing Officer or Director

Date