## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

1. Entity Name

Moneris Solutions, Inc.

DOCUMENT # F03000005314



## **FILED** Mar 31, 2004 8:00 am Secretary of State

03-31-2004 90021 036 \*\*\*158.75

DO NOT	WRITE	IN THIS	SPACE

	DO NOT WINT		7496			
· ·		3. Mailing Address		44023065		
		3250 Bloor St	. W.	44023003		
		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPA	CE	
C)+ - 9 C+-4		14th Floor			T. January E.	
City & State Buffalo Grove		City & State Toronto, Ontario		4. FEI Number   Applied For   Not Applicab		
Zip Country		Zip	Country	\$0.75 A (m)		
Illinoi	l '	M8X 2X9	Canada		Required	
		·		7. Name and Address of Current Registered Ag	jent	
DO NOT WRITE			Name Co:	Name Corporation Service Company		
				Street Address (P.O. Box Number is Not Acceptable)		
k	IN THIS S	SDACE				
	IN I LIIO 2	DEAGE	1201 Ha	ayes Street		
			City	City Zin Code		
· (			Tall		32301	
	named entity submits this stateme ions of registered agent.	ricion the purpose of changing its	registered office of reg	istered agent, or both, in the State of Florida. I am fami	liar with, and accept	
SIGNATURE .						
	Signature, typed or printed name of registered		E. Registered Agent signature red	puired when reinstating) DATE		
	nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00	,		9. Election Campaign Financing	\$5.00 May Be	
	Amended UBR is \$61.25			Trust Fund Contribution.	Added to Fees	
Make Check	Payable to Florida Departmen					
TU.		AND DIRECTORS	TITLE			
NAME	Director, President & CEO		TITLE NAME			
STREET ADDRESS	Jim Baumgartner 3250 Bloor St. W. 14th Floor		STREET ADDRESS			
CITY-ST-ZIP	Toronto, Ontario (	· -	CITY-ST-ZIP			
TITLE	Director		TITLE			
NAME	Brad Simon		NAME			
STREET ADDRESS	c/o RBC Mortgage,	440 North Orleans	STREET ADDRESS			
CITY-ST-ZIP	Chicago, Illinois		CITY-ST-ZIP			
. TITLE .	Director		TITLE .			
NAME	Paul Reagan		NAME			
STREET ADDRESS CITY-ST-ZIP	c/o Harris Trust,			DO NOT WRIT	E	
	Chicago, Illinois	60603 USA	CITY-ST-ZIP			
TITLE NAME	Treasurer		TITLE	IN THIS SPACE		
NAME STREET ADDRESS	Sally Mitchell	1	NAME STREET ADDRESS			
CITY-ST-ZIP	3250 Bloor St. W : Toronto, Ontario (		CITY-ST-ZIP			
TITLE		Lanaud Mon Zny	TITLE			
NAME	Secretary Fern Glowinsky		NAME			
STREET ADDRESS	3250 Bloor St. W.	14th Floor	STREET ADDRESS			
CITY-ST-ZIP	Toronto, Ontario		CITY-ST-ZIP			
TITLE			TITLE			
NAME	Vice President, Sa Larry Wine	ates	NAME			
STREET ADDRESS	700 E. Lake Cook F	24	STREET ADDRESS			

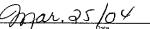
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental door is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or on an attachment with an address, with all otherwise empowered.

CITY-ST-ZIP

SIGNATURE:

Fern Glowinsky SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Buffolo Grove, Allinois 60089



416-734-1229