2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M64798

FILED Apr 06, 2006 Secretary of State

Entity Name: AUTOMATED MERCHANT SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business: 2500 NORTH MILITARY TRAIL SUITE 450 BOCA RATON, FL 33431 **New Mailing Address: Current Mailing Address:** 2500 NORTH MILITARY TRAIL SUITE 450 BOCA RATON, FL 33071 FEI Number: 65-0025824 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: FACTERMAN, BRYAN FACTERMAN, BRYAN 7538 OLD THYME CT 1624 NE 8 STREET PARKLAND, FL 33076 FT LAUDERDALE, FL 33304 US 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: BRYAN FACTERMAN 04/06/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SLOANE, BARRY Name: Name: 1343 SMITH RIDGE RD Address: Address: City-St-Zip: NEW CANAAN, CT 06840 City-St-Zip: Title: Title: () Change () Addition MGR () Delete Name: RUBIN, JEFFREY Name: 111 DEER RUN Address: Address: ROSLYN HEIGHTS, NY 11577 City-St-Zip: City-St-Zip: () Delete Title: Title: FVP FVP (X) Change () Addition FACTERMAN, BRYAN Name: FACTERMAN, BRYAN Name: 7583 OLD THYME CT **1624 NE 8 STREET** Address: Address: City-St-Zip: PARKLAND, FL 33076 City-St-Zip: FT LAUDERDALE, FL 33304

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BRYAN FACTERMAN **EVP** 04/06/2006