2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2004
Secretary of State

DOCUMENT# P03000046751

Entity Name: PAY DIRECT, INC.

Current Principal Place of Business:

6245 SW 56 STREET
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

6245 SW 56 STREET
DAVIE, FL 33314

New Mailing Address:

P.O. BOX 290240
DAVIE, FL 33329 02

FEI Number: 52-2407714 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRAVERT, NICOLE
6245 SW 56 STREET
DAVIE, FL 33314 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V-P ( ) Change (X) Addition
Name: SEDGHI, ISABELLE J V-P
Address: P.O. BOX 290240
City-St-Zip: DAVIE, FL 33329 02

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: NICOLE TRAVERT PRES 09/13/2004

Electronic Signature of Signing Officer or Director Date