2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012242

Entity Name: MEGACARD INC.

FILED Feb 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4001 WEST HENRY AVE, SUITE 306 12000 N. DALE MABRY HIGHWAY TAMPA, FL 33614

110

TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

4001 WEST HENRY AVE, SUITE 306 12000 N. DALE MABRY HIGHWAYT

TAMPA, FL 33614

TAMPA, FL 33618 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC THE LAW OFFICES OF NICK SPRADLIN, PLLC

1200 N. DALE MABRY 12000 N. DALE MABRY HIGHWAY

#110 #110

TAMPA, FL 33618 US TAMPA, FL 33618 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: NICKOLAS SPRADLIN ESQ 02/15/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete

Name: VESTOR, TIM 1200 N. DALE MABRY HIGHWAY, #110 Address:

City-St-Zip: TAMPA, FL 33618

Title:

VPD Title: () Delete ORTMANN, MATHIAS Name:

1200 N. DALE MABRY HIGHWAY, #110 Address:

TAMPA, FL 33618 City-St-Zip:

Title: STD () Delete ECHTERNACH, SVEN Name:

1200 N. DALE MABRY HIGHWAY, #110 Address:

City-St-Zip: TAMPA, FL 33618

Title: (X) Delete SPRADLIN, MARIANELLA Name:

Address: 1200 N. DALE MABRY HIGHWAY, #110

City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

Name: VESTOR, TIM

12000 N. DALE MABRY HIGHWAY, #110 Address:

TAMPA, FL 33618 City-St-Zip:

Title: VPD (X) Change () Addition

Name: ORTMANN, MATHIAS

12000 N. DALE MABRY HIGHWAY, #110 Address:

City-St-Zip: TAMPA, FL 33618

Title: (X) Change () Addition STD

ECHTERNACH, SVEN Name:

12000 N. DALE MABRY HIGHWAY, #110 Address:

City-St-Zip: TAMPA, FL 33618

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NICKOLAS SPRADLIN RA 02/15/2008