2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State
04-28-2006 90194 046 ***150.00

DOCUMENT # F04000004769

1. Entity Name
ELECTRONIC PAYMENT & TRANSFER CORP

Principal Place of Business	Mailing Address
~~224 PONTE VEDRA PARK DRIVE~~	~~224 PONTE VEDRA PARK DRIVE~~
PONTE VEDRA BEACH, FL 32082	PONTE VEDRA BEACH, FL 32082
5150 Palm Valley Road Suite 208	5150 Palm Valley Road Suite 208

50017379

04252006 Chg-P CR2E034 (11/05)

2. Principal Place of Business		3. Mailing Address	
5750 Palm Valley Road		5750 Palm Valley Road	
Suite, Apt. #, etc.: Suite 208		Suite, Apt. #, etc.: Suite 208	
City & State: Ponte Vedra Beach, FL		City & State: Ponte Vedra Beach, FL	
Zip: 32082	Country: USA.	Zip: 32082	Country: USA

4. FEI Number: 87-0715743 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
INCORP SERVICES, INC 18450 NE 2ND AVE MIAMI, FL 33179	Name: Street Address (P.O. Box Number is Not Acceptable): City: FL Zip Code:

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] — Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE 04-25-06

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GRAHAM, STEPHEN D 224 PONTE VEDRA PARK DRIVE PONTE VEDRA BEACH, FL 32082 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Stephen D. Graham 5150 Palm Valley Road, Suite 208 Ponte Vedra Beach, FL 32082 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST GRAHAM, DEBRA L 224 PONTE VEDRA PARK DRIVE PONTE VEDRA BEACH, FL 32082 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Debra L. Graham 5150 Palm Valley Road, Suite 208 Ponte Vedra Beach, FL 32082 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 04-25-06 Daytime Phone #: 904-280-4445