

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000041098

**Entity Name:** NET 1 UEPS TECHNOLOGIES, INC.

**FILED**  
**Mar 08, 2016**  
**Secretary of State**  
**CC4243434269**

**Current Principal Place of Business:**

PRESIDENT PLACE 4TH FLOOR  
CNR JAN SMUTS AND BOLTON RD  
ROSEBANK, GAUTENG 2195

**Current Mailing Address:**

PO BOX 2424  
PARKLANDS, GAUTENG 2121 ZA

**FEI Number:** 98-0171860

**Certificate of Status Desired:** No

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

INCORPORATING SERVICES, LTD.  
1540 GLENWAY DRIVE  
TALLAHASSEE, FL 32301 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CD  
Name BELAMANT, SERGE  
Address PRESIDENT PLACE 4TH FLOOR  
CNR JAN SMUTS AND BOLTON RD  
City-State-Zip: ROSEBANK GAUTENG 2195

Title D  
Name PEIN, ALASDAIR J  
Address PRESIDENT PLACE 4TH FLOOR  
CNR JAN SMUTS AND BOLTON RD  
City-State-Zip: ROSEBANK GAUTENG 2195

Title DTF  
Name KOTZE, HERMAN G  
Address PRESIDENT PLACE 4TH FLOOR  
CNR JAN SMUTS AND BOLTON RD  
City-State-Zip: ROSEBANK GAUTENG 2195

Title D  
Name SEABROOKE, CHRISTOPHER S  
Address 4 COMMERCE SQUARE, 39 RIVONIA  
ROAD  
City-State-Zip: SANDHURST, SANDTON GAUTENG  
2196

Title D  
Name EDWARDS, PAUL  
Address PRESIDENT PLACE 4TH FLOOR  
CNR JAN SMUTS AND BOLTON RD  
City-State-Zip: ROSEBANK GAUTENG 2195

*I hereby 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 all other like empowered.*

**SIGNATURE:** KOTZE , HERMAN G

DTF

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date