2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006380

Entity Name: PLASTIC CARD SYSTEMS, INC.

FILED Jul 01, 2005 Secretary of State

Entity Name: PLASTIC	CARD STSTEWS, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
31 PIERCE ST. NORTHBORO, MA 0153	32			
Current Mailing Address:		New Mailing Address:		
31 PIERCE ST. NORTHBORO, MA 0153	32			
FEI Number: 04-2976003	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
BRAVO, MARIO 8001 SW 134TH AVE. MIAMI, FL 33183 US				
The above named entity s in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electron	ic Signature of Registered Age	ent	Date	
Election Campaign Financing Trust Fund Contribution().				

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: CDST () Delete Title: CDST AXLINE, ROBERT AXLINE, ROBERT CEO Name: Name: 31 PIERCE ST. Address: 31 PIERCE ST. Address: City-St-Zip: NORTHBORO, MA 01532 City-St-Zip: NORTHBORO, MA 01532

Title: PD () Delete Title: PD (X) Change () Addition AXLINE, DONALD AXLINE, DONALD PRESIDE Name: Name: Address: 31 PIERCE ST. Address: 31 PIERCE ST. NORTHBORO, MA 01532 NORTHBORO, MA 01532 City-St-Zip: City-St-Zip:

TII ND () D () A () A ()

Title: VD () Delete Title: VD (X) Change () Addition Name: KLINE, PETER VP

 Address:
 31 PIERCE ST.
 Address:
 31 PIERCE ST.

 City-St-Zip:
 NORTHBORO, MA 01532
 City-St-Zip:
 NORTHBORO, MA 01532

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: ROBERT P. AXLINE CEO 07/01/2005