

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 29, 2008 8:00 am**  
**Secretary of State**

02-29-2008 90015 018 \*\*\*158.75

<b>DOCUMENT # F03000005314</b>					
<b>1. Entity Name</b> <b>MONERIS SOLUTIONS, INC.</b>					
<b>Principal Place of Business</b> 700 E LAKE COOK RD BUFFALO GROVE, IL 60089			<b>Mailing Address</b> 3300 BLOOR ST 10TH FLOOR TORONTO, ONTARIO, CA M8X XX		
<b>2. Principal Place of Business - No P.O. Box #</b> 150 N. Martingale Rd			<b>3. Mailing Address</b>		
Suite, Apt. #, etc. 900			Suite, Apt. #, etc.		
City & State Schaumburg, IL			City & State		
Zip 60173		Country USA		Zip	
Country USA		Zip		Country	
<b>6. Name and Address of Current Registered Agent</b>  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="display: flex; justify-content: space-between;"> <span>FL</span> <span>Zip Code</span> </div>	
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	DCEO BAUMGARTNER, JIM <input type="checkbox"/> Delete 3300 BLOOR ST W. 10TH FLOOR TORONTO, ONTARIO, CA m8x 2x2		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition  D Conrad Wood 3201 Beechleaf Ct, 7th Floor Raleigh, NC 27604	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	D COOPER, ROBERT <input checked="" type="checkbox"/> Delete 3201 BEECHLEAF COURT, 7TH FLOOR RALEIGH, NC 27604		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition  D Conrad Wood 3201 Beechleaf Ct, 7th Floor Raleigh, NC 27604	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	D ULLRICH, CYNTHIA <input type="checkbox"/> Delete 111 WEST MONROE ST 21ST FLOOR CHICAGO, IL 60603		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	T MITCHELL, SALLY <input type="checkbox"/> Delete 3300 BLOOR ST W. 21ST FLOOR TORONTO, ONTARIO, CA m8x 2x2		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	S GLOWINSKY, FERN <input type="checkbox"/> Delete 3300 BLOOR ST W. 10TH FLOOR TORONTO, ONTARIO, CA m8x 2x2		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	PRES COHEN, GREG <input type="checkbox"/> Delete 700 E LAKE COOK RD. BUFFALO GROVE, IL 60089		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PRES Cohen, Greg 150 N. Martingale Rd. #900 Schaumburg, IL 60173 USA	
<b>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.</b>					
<b>SIGNATURE:</b> <u>Assist. Secretary Feb 27/08</u> <b>416-734-1229</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					