

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000449

FILED
May 01, 2008
Secretary of State

Entity Name: UNIVERSAL PAYMENT SOLUTIONS INC.

Current Principal Place of Business:

17 SQUADRON BLVD.
SUITE 320
NEW CITY, NY 10956

New Principal Place of Business:

Current Mailing Address:

17 SQUADRON BLVD.
SUITE 320
NEW CITY, NY 10956

New Mailing Address:

FEI Number: 20-1912209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: REPHEN, BRADLEY
Address: 17 SQUADRON BLVD., STE. 305
City-St-Zip: NEW CITY, NY 10956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BRADLEY J. REPHEN

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date