

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002319

Entity Name: GOOGLE PAYMENT CORP.

FILED
Mar 28, 2007
Secretary of State

Current Principal Place of Business:

1600 AMPHITHEATRE PARKWAY
MOUNTAIN VIEW, CA 94043

New Principal Place of Business:

1600 AMPHITHEATRE PARKWAY
MOUNTAIN VIEW, CA 94043 US

Current Mailing Address:

1600 AMPHITHEATRE PARKWAY
ATTN: DEBRA J. MCMANAMAN
MOUNTAIN VIEW, CA 94043

New Mailing Address:

1600 AMPHITHEATRE PARKWAY
ATTN: DEBRA J. MCMANAMAN
MOUNTAIN VIEW, CA 94043 US

FEI Number: 20-2597227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: LING, BENJAMIN
Address: 1600 AMPHITHEATRE PARKWAY
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: SEC () Delete
Name: OLIVERI, THOMAS
Address: 1600 AMPHITHEATRE PARKWAY
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LING, BENJAMIN
Address: 1600 AMPHITHEATRE PARKWAY
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: S (X) Change () Addition
Name: OLIVERI, THOMAS
Address: 1600 AMPHITHEATRE PARKWAY
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: P () Change (X) Addition
Name: LING, BENJAMIN
Address: 1600 AMPHITHEATRE PARKWAY
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

Title: V () Change (X) Addition
Name: MANGALICK, PIYUSH
Address: 1600 AMPHITHEATRE PARKWAY
City-St-Zip: MOUNTAIN VIEW, CA 94043 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BENJAMIN LING

P

03/28/2007

Electronic Signature of Signing Officer or Director

_____ Date