

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002559

FILED
Apr 28, 2011
Secretary of State

Entity Name: EQUIANT FINANCIAL SERVICES INC.

Current Principal Place of Business:

5401 N. PIMA RD
SUITE 150
SCOTTSDALE, AZ 85250

New Principal Place of Business:

Current Mailing Address:

5401 N. PIMA RD
SUITE 150
SCOTTSDALE, AZ 85250

New Mailing Address:

FEI Number: 86-0695380

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

OFFICERS AND DIRECTORS:

Title: TRES
Name: SCHADE, DON TREAS.
Address: 5401 N. PIMA RD. STE. 150
City-St-Zip: SCOTTSDALE, AZ 85250

Title: SEC
Name: ST. HILAIRE-SMITH, ERIC SEC.
Address: 5401 N. PIMA RD. SUITE 150
City-St-Zip: SCOTTSDALE, AZ 85250

Title: VP
Name: KIM, DON VP
Address: 5401 N. PIMA RD. SUITE 150
City-St-Zip: SCOTTSDALE, AZ 85250

Title: PRES
Name: MORRISROE, FRANK A PRES
Address: 5401 N. PIMA RD. SUITE 150
City-St-Zip: SCOTTSDALE, AZ 85250

Title: D
Name: MORRISROE, FRANK A DIRECT.
Address: 5401 N. PIMA RD. SUITE 150
City-St-Zip: SCOTTSDALE, AZ 85250

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: FRANK A. MORRISROE

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date