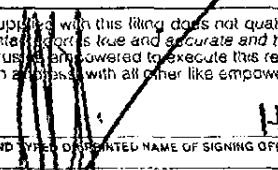


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2006 08:00 AM
Secretary of State

DOCUMENT # F99000004056 1. Entity Name INGENICO (LATIN AMERICA) INC.					
Principal Place of Business 9155 S. DADELAND BLVD., STE. 1408 MIAMI, FL 33156			Mailing Address 9155 S. DADELAND BLVD., STE. 1408 MIAMI, FL 33156		
2. Principal Place of Business Suite, Apt # etc			3. Mailing Address Suite, Apt #, etc		
City & State			City & State		
Zip		Country		Zip	
Country		Country		02202006 Chg-P CR2E034 (11/05)	
4. FEI Number 91-1780883				☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent URBAN, WILLIAM 200 S. BISCAYNE BLVD., STE. 830 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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.					
SIGNATURE _____ Signature, typed or printed name of registered agent and the filer acceptable. (NOTE: Registered Agent's signature required when not applicable)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CDP COMPAIN, GERARD 9155 S DADELAND BLVD, SUITE 1408 MIAMI, FL 33156	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	1100000480573 03/20/06-80015-019 150.00
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DV THOMSON, L. BARRY 9155 S DADELAND BLVD, SUITE 1408 MIAMI, FL 33156	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DS FILIPPINI, JEAN-LOUIS 9155 S DADELAND BLVD, SUITE 1408 MIAMI, FL 33156	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V RAIMONDI, HILARIO 9155 S DADELAND BLVD, SUITE 1408 MIAMI, FL 33156	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
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.					
SIGNATURE: X  Hilario Raimondi SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					