2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007
Secretary of State

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Entity Name: MERCHANTS' TPS, LLC

Current Principal Place of Business:

3299 NW BOCA RATON BLVD., SUITE 100
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

3299 NW BOCA RATON BLVD., SUITE 100
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 43-2083323 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRUDEN, JAMES L ESQ
980 N FEDERAL HIGHWAY, SUITE 404
BOCA RATON, FL 33432 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CHARGE CARD SYSTEMS,, INC.
Address: 3299 NW BOCA RATON BLVD., SUITE 100
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM ( ) Delete
Name: WILLIAM W. PAUL ENTE, RPRISES, INC.
Address: 2141 NW 85TH WAY
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTHONY ANDREOZZI SR. PRES 04/16/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date