2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054587

Entity Name: MERCHANTS' TPS, LLC

FILED Jan 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3299 NW BOCA RATON BLVD., SUITE 100 1515 S FEDERAL HWY. BOCA RATON, FL 33431 STE. 106

BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

1515 S FEDERAL HWY. 3299 NW BOCA RATON BLVD., SUITE 100 STE. 106 BOCA RATON, FL 33431

BOCA RATON, FL 33432

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition CHARGE CARD SYSTEMS,, INC. CHARGE CARD SYSTEMS,, INC. Name: Name: Address: 1515 S FEDERAL HWY., STE. 106

3299 NW BOCA RATON BLVD., SUITE 100 Address:

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33432

Title: MGRM () Delete Title: () Change () Addition

Name: WILLIAM W. PAUL ENTE, RPRISES, INC. Name: Address: 2141 NW 85TH WAY Address: City-St-Zip: CORAL SPRINGS, FL 33071 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 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** 01/11/2008