

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000049664

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** UNIVERSAL PAYMENT SYSTEMS, L.L.C.

**Current Principal Place of Business:**

12951 S.W. 80 STREET  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

12951 S.W. 80 STREET  
MIAMI, FL 33183

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ALTAMIRANO, ARTURO  
12951 S.W. 80 STREET  
MIAMI, FL 33183 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  
Name: TORRESVALLE ECHEVERR, JESUS  
Address: 12951 S.W. 80 STREET  
City-St-Zip: MIAMI, FL 33183

Title: MGRM  
Name: ALTAMIRANO, ROSARIO  
Address: 12951 S.W. 80 STREET  
City-St-Zip: MIAMI, FL 33183

Title: MGRM  
Name: VELAZQUEZ, JUAN  
Address: 12951 S.W. 80 STREET  
City-St-Zip: MIAMI, FL 33183

I hereby 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: JUAN VELAZQUEZ

MGRM

04/27/2010

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