

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000009791

Entity Name: BANCARD SERVICES, INC.

FILED  
Jan 16, 2006  
Secretary of State

## Current Principal Place of Business:

1883 W. STATE RD. 84 SUITE 105  
FORT LAUDERDALE, FL 33315

## New Principal Place of Business:

1868 N. UNIVERSITY DR  
SUITE 304  
PLANTATION, FL 33322

## Current Mailing Address:

1883 W. STATE RD. 84 SUITE 105  
SUITE 1003  
FORT LAUDERDALE, FL 33315

## New Mailing Address:

4 WOODHOLLOW RD  
SUITE 130  
PARSIPPANY, NJ 07054

FEI Number: 52-2212983

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAPIRO, STEPHEN J  
1883 W. STATE RD. 84  
SUITE 105  
FORT LAUDERDALE, FL 33315 US

## Name and Address of New Registered Agent:

JAMES TITTLE P.A.  
4 HARVARD CIRCLE  
SUITE 600  
WEST PALM BEACH, FL 33409 US

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: JIM TITTLE

01/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SHAPIRO, STEPHEN J  
Address: 1883 W. STATE RD. 84 #105  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: D ( ) Delete  
Name: SHAPIRO, SCOTT P  
Address: 1883 W. STATE RD. 84 #105  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: D ( ) Delete  
Name: KARGER, DARREN  
Address: 42 EMERSON RD.  
City-St-Zip: MORRIS PLAINS, NJ 07950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SHAPIRO, STEPHEN J  
Address: 4 WOODHOLLOW RD #130  
City-St-Zip: PARSEPPANY, NJ 07054

Title: D (X) Change ( ) Addition  
Name: SHAPIRO, SCOTT P  
Address: 1868 N UNIVERSITY DR #304  
City-St-Zip: PLANTATION, FL 33322

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 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 an address, with all other like empowered.

SIGNATURE: STEVE SHAPIRO

D

01/16/2006

Electronic Signature of Signing Officer or Director

Date