## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000009791

KARGER, DARREN

MORRIS PLAINS, NJ 07950

42 EMERSON RD

Name:

Address: City-St-Zip:

FILED Apr 10, 2008 Secretary of State

**Entity Name:** BANCARD SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 1868 N. UNIVERSITY DR SUITE 304 PLANTATION, FL 33322 **Current Mailing Address: New Mailing Address:** 1868 N. UNIVERSITY DR. SUITE 304 PLANTATION, FL 33322 FEI Number: 52-2212983 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: JAMES TITTLE P.A. JAMES TITTLE P.A. 4 HARVARD CIRCLE 11382 PROSPERITY FARMS RD BLDG F SUITE 222 SUITE 600 WEST PALM BEACH, FL 33409 US PALM BEACH GARDENS, FL 33410 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: 04/10/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SHAPIRO, STEPHEN J Name: Name: 1868 N. UNIVERSITY DR. #304 Address: Address: City-St-Zip: PLANTATION, FL 33322 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SHAPIRO, SCOTT P Name: 1868 N UNIVERSITY DR #304 Address: Address: PLANTATION, FL 33322 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition

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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVE SHAPIRO 04/10/2008 D