2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001710

Entity Name: NATIONWIDE PAYMENT SYSTEMS INC.

FILED Jan 14, 2008 Secretary of State

Littley Hai	iic: NATIONWIDE	TATMENT OTOTEMOT	10 .		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1500 W. C SUITE 503	YPRESS CREEK F	RD			
	JDERDALE, FL 33	309 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE 503	YPRESS CREEK F JDERDALE, FL 33				
FEI Number:	65-1067143 FE	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
ALEXANDER, BRUCE 9200 SOUTH DADELAND BLVD SUITE 523 MIAMI, FL 33156 US			1500 W CYPŔESS CF SUITE 503	ALEXANDER, BRUCE 1500 W CYPRESS CREEK ROAD SUITE 503 FORT LAUDERDALE, FL 33309 US	
	named entity subn e of Florida.	nits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				01/14/2008	
	Electronic S	ignature of Registered Ag	gent	Date	
Election Car	npaign Financing Tru	st Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Dele BURNEY, DAVID 1500 W. CYPRESS FORT LAUDERDALE	CREEK RD, SUITE 503	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VBD () Dele KOPELMAN, ALLEN 1500 W. CYPRESS FORT LAUDERDALE	CREEK RD, SUITE 503	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: ALLEN KOPELMAN **VBD** 01/14/2008