

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90326 013 \*\*\*150.00

DOCUMENT # P 010000 33774  
1. Entity Name  
WEB MERCHANT SERVICES, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1504 CROSSBEAM CIRCLE 3. Mailing Address  
SAME -  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
CASSELBERRY, FL  
City & State  
FL  
Zip  
32707 County  
SEMINOLE

4. FEI Number  
59 3710 555 Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name  
Lawrence M Kosto, Esq.  
Street Address (P.O. Box Number is Not Acceptable)  
619 East Washington St  
City  
Orlando FL Zip Code  
32801

8. 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  
Guy Gabaldon  
Signature, typed or printed name of registered agent and the Corporation

(NOTE: Registered Agent's signature is required when re-electing)

5/1/2002  
DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
PRESIDENT  
GUY GABALDON, JR.  
1504 CROSSBEAM CIRCLE  
CASSELBERRY FL 32707

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
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CITY- ST- ZIP

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 807, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Guy Gabaldon GUY GABALDON, JR 5/1/02 407696-5065  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone 2

CR2E034B (12/01)