2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000047995

Entity Name: INTERNATIONAL PAYMASTER SYSTEMS, INC.

FILED May 04, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

134 E FT DADE AVENUE 17757 US HWY 19 NORTH

BROOKSVILLE, FL 34601 US 470

CLEARWATER, FL 33764 US

Current Mailing Address: New Mailing Address:

134 E FT. DADE AVE 17757 US HWY 19 NORTH

BROOKSVILLE, FL 34601 US 470 CLEARWATER, FL 33764 US

FEI Number: 59-3724516 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:

BARBEE, DEBRA K DAVIS, DEBRA K

134 E. FT DADE AVE 17757 US HWY 19 NORTH BROOKSVILLE, FL 34601 US #470

CLEARWATER, FL 33764 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: DEBRA K. DAVIS 05/04/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Delete Title: C (X) Change () Addition

Name: BARBEE, P.M. Name: BARBEE, P.M.

 Address:
 134 E FT DADE AVE
 Address:
 17757 US HWY 19 NORTH

 City-St-Zip:
 BROOKSVILLE, FL 34601
 City-St-Zip:
 CLEARWATER, FL 33764 US

Title: P () Delete Title: P (X) Change () Addition

Name: PERRY, KIM C Name: PERRY, KIM C

Address: 134 EAST FORT DADE AVENUE Address: 17757 US HWY 19 NORTH
City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: CLEARWATER, FL 33764 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: P. M. BARBEE C 05/04/2004