

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000089070

**Entity Name:** G.M.R. PAYMENT SYSTEMS, INC.

**FILED**  
**Sep 29, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

6175 HARBOUR GREEN DR.  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

3404 DUNES VISTA DRIVE  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

6175 HARBOUR GREEN DR.  
LAKE WORTH, FL 33467

**New Mailing Address:**

3404 DUNES VISTA DRIVE  
POMPANO BEACH, FL 33069

**FEI Number:** 65-1137048

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BEATTIE, WILLIAM  
4096 NW 7TH PLACE  
DEERFIELD BEACH, FL 33442 US

**Name and Address of New Registered Agent:**

BEATTIE, WILLIAM  
3404 DUNES VISTA DRIVE  
POMPANO BEACH, FL 33069 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: WILLIAM BEATTIE

09/29/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BEATTIE, WILLIAM  
Address: 3404 DUNES VISTA DRIVE  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP  
Name: BEATTIE, DAWN  
Address: 3404 DUNES VISTA DRIVE  
City-St-Zip: POMPANO BEACH, FL 33069

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM BEATTIE

PRES

09/29/2014

Electronic Signature of Signing Officer or Director

Date