2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000120498

Entity Name: RS FINANCIAL PROCESSING INC

FILED Sep 13, 2002 Secretary of State

Entity Name: RSFINA	ANCIAL PROCESSING INC			
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
6151 MIRAMAR PKWY # 331 MIRAMAR, FL 33023				
Current Mailing Address:		New Mailing Address	New Mailing Address:	
6151 MIRAMAR PKWY # 331 MIRAMAR, FL 33023				
FEI Number: 65-1160032	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
ROHRET, KARIN 5290 SEMINOLE BLVD E/F ST PETERSBURG, FL	33708 US			
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
	to satisfy its Intangible Tax filing req	uirement and elects to do so (X).		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: T (Name: ROHRET, KAF) Delete RIN	Title: P Name: RADOM, RUS	(X) Change () Addition	

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

 Name:
 ROHRET, KARIN
 Name:
 RADOM, RUSSEL

 Address:
 6151 MIRAMAR PKWY # 331
 Address:
 6151 MIRAMAR PKWY # 331

 City-St-Zip:
 MIRAMAR, FL 33023
 City-St-Zip:
 MIRAMAR, FL 33023

 Title:
 V
 () Change () Addition

 Title:
 V
 (X) Delete
 Title:

 Name:
 RADOM, RUSSEL
 Name:

 Address:
 6151 MIRAMAR PKWY
 Address:

 City-St-Zip:
 MIRAMAR, FL 33023
 City-St-Zip:

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: RUSSEL RADOM P 09/13/2002