2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125704

City-St-Zip: MIAMI BEACH, FL 33140 US

Entity Name: AMERICA ONE PAYMENT SYSTEMS OF FLORIDA, INC.

FILED Mar 17, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
524 ARTHUR GODFR SUITE # 300	EY ROAD			
MIAMI BEACH, FL 33	140 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
524 ARTHUR GODFR SUITE # 300	EY ROAD			
MIAMI BEACH, FL 33	140 US			
FEI Number: 16-1641724	FEI 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:	
SAKA, SANDY 524 ARTHUR GODFR SUITE # 300 MIAMI BEACH, FL 33				
The above named enti in the State of Florida.	ty submits this statement for th	ne purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		Agent	Date	
Election Campaign Finan	cing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P Name: SAKA, SANI		Title: Name:	() Change () Addition	

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: SANDY SAKA P 03/17/2005