2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000074210

. 1. Entity Name

AMERICAN PAYMENTS PROCESSING CORPORATION



FILED Apr 27, 2007 08:00 A Secretary of State

Principal Place of Business

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1201 6TH AVENUE WEST SUITE 210 BRADENTON, FL 34205

Mailing Address
1201 6TH AVENUE WEST SUITE 210

BRADENTON, FL 34205



DO NOT WRITE IN THIS SPA	ACE
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 02012007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number
 Applied For Not Applicable

 20-0073513
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BONANNO, JOHN D ESQ 1205 MANATEE AVENUE WEST BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE

BRADENI	ON, FL 34205			IN ⁻	THIS SPACE
	named entity submits this statement for the pritions of registered agent.	urpose of changing its registered off	ice or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable (NOTE, Registered Agen	signature	required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAS, VIVIAN C 5133 TOMKEN ROAD MISSISSAUGA ONTARIO. L4W 1P1	TOHS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TONG, WINGLOON L 1411 FREEWAY DRIVE SANTA FE SPRINGS, CA 90670			ب ۽ ڏن سنجي	U00000736183
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,				
TITLE NAME STREET ADDRESS				•	

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Dun E. Tal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V. C. DIAS

APR 25.2007 941 8074278

Daytime Phor