

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110623

FILED  
Apr 05, 2010  
Secretary of State

**Entity Name:** INTEGRITY MERCHANT PAYMENT SOLUTIONS, INC.

**Current Principal Place of Business:**

5353 N FEDERAL HWY STE 200  
FORT LAUDERDALE, FL 33308 US

**New Principal Place of Business:**

**Current Mailing Address:**

2170 NE 51 CT STE C30  
FORT LAUDERDALE, FL 33308 US

**New Mailing Address:**

**FEI Number:** 20-0285509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEVINE, JEFFREY  
2170 NE 51 CT STE C30  
FT LAUDERDALE, FL 33308 US

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

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:**

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** CHESHIRE, STUART  
**Address:** 60 HENDRICKS ISLE SUITE 2  
**City-St-Zip:** FT LAUDERDALE, FL 33301

**Title:** D  
**Name:** LEVINE, JEFFREY  
**Address:** 3000 HOLIDAY DR., #803  
**City-St-Zip:** FORT LAUDERDALE, FL 33316

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:** STUART CHESHIRE

VP

04/05/2010

Electronic Signature of Signing Officer or Director

Date