

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000012556

**FILED**  
**Jan 27, 2010**  
**Secretary of State**

**Entity Name:** PACIFIC PAY SYSTEMS, INC.

**Current Principal Place of Business:**

440 SAWGRASS CORP PKW SUITE 210B  
SUNRISE, FL 33325

**New Principal Place of Business:**

**Current Mailing Address:**

440 SAWGRASS CORP PKW SUITE 210B  
SUNRISE, FL 33325

**New Mailing Address:**

**FEI Number:** 20-8344738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NAVARRO, RENE ESQ  
2929 SW 3RD AVE  
SUITE 210  
SUNRISE, FL 33129 US

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

MEDINA, ERNESTO S ESQ  
782 NW 42ND AVE  
SUITE 341  
MIAMI, FL 33126 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:** ERNESTO S. MEDINA, ESQ - RA

01/27/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** MONTANO, ROBERT  
**Address:** 440 SAWGRASS CORPORATE PARKWAY SUITE 210B  
**City-St-Zip:** SUNRISE, FL 33325

**Title:** D  
**Name:** RODRIGUEZ, GINA  
**Address:** 440 SAWGRASS CORPORATE PARKWAY SUITE 210B  
**City-St-Zip:** SUNRISE, FL 33325

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:** GINA RODRIGUEZ

D

01/27/2010

Electronic Signature of Signing Officer or Director

Date