

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000009844

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Entity Name:** POWER MERCHANT SERVICES, INC.

**Current Principal Place of Business:**

275 FONTAINEBLEAU BLVD., STE 144  
MIAMI, FL 33172

**New Principal Place of Business:**

275 FONTAINEBLEAU BLVD., STE 225 H  
MIAMI, FL 33172

**Current Mailing Address:**

275 FONTAINEBLEAU BLVD., STE 144  
MIAMI, FL 33172

**New Mailing Address:**

275 FONTAINEBLEAU BLVD., STE 225 H  
MIAMI, FL 33172

FEI Number: 26-4169664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PITTA, RAUL  
275 FONTAINEBLEAU BLVD. STE 144  
MIAMI, FL 33172 US

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

PITTA, RAUL  
275 FONTAINEBLEAU BLVD. STE 225 H  
MIAMI, FL 33172 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/28/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PITTA, RAUL  
Address: 275 FONTAINEBLEAU BLVD. STE. 225 H  
City-St-Zip: MIAMI, FL 33172

Title: VP  
Name: GILGORRI, GONZALO D  
Address: 275 FONTAINEBLEAU BLVD. STE. 225 H  
City-St-Zip: MIAMI, FL 33172

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: RAUL PITTA

Electronic Signature of Signing Officer or Director

P

02/28/2012

Date