2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2012
Secretary of State

DOCUMENT# P11000057608

Entity Name: HYPERSOLUTIONS PAYMENT SYSTEMS, INC.

Current Principal Place of Business:

7190 S.W. 14 STREET
PEMBROKE PINES, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

7190 S.W. 14 STREET
PEMBROKE PINES, FL 33023 US

New Mailing Address:

FEI Number: 45-2598335 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNANDEZ, AMY
7190 S.W. 14 STREET
PEMBROKE PINES, FL 33023 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

OFFICERS AND DIRECTORS:

Title: D,P
Name: LEON, MIGUEL V
Address: 7190 S.W. 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: D,VP
Name: ROMERO, PEDRO PABLO
Address: 7190 S.W. 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: D,VP
Name: LEON HERNANDEZ, MIGUEL ANGEL
Address: 7190 S.W. 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: S
Name: OBAODUN, INC.
Address: 7190 S.W. 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33023 US

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: MIGUEL V LEON P 01/09/2012

Electronic Signature of Signing Officer or Director Date