2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P17884

Entity Name: EPS SETTLEMENTS GROUP, INC.

FILED Sep 13, 2002 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:				
7100 W. BELLEVIEW AVENUE SUITE 300 GREENWOOD VILLAGE, CO 80111 US					7100 E. BELLEVIEW AVENUE SUITE 300 GREENWOOD VILLAGE, CO 80111 US				
Current Mailing Address:					New Mailing Address:				
7100 W. BELLEVIEW AVENUE SUITE 300 GREENWOOD VILLAGE, CO 80111 US					7100 E. BELLEVIEW AVENUE				
					SUITE 300 GREENWOOD VILLAGE, CO 80111 US				
FEI Number: 95-4134668 FEI Number Applied For ()					FEI Number Not Applicable ()			Certificate of Status Desired ()	
Name and	l Address of C	urrent Regis	stered Agent:		Name and	Address of	New Register	ed Agent:	
526 E. PAI	VICES, INC. RK AVENUE SSEE, FL 3230	01 US							
	named entity se of Florida.	submits this s	tatement for the p	purpose c	of changing i	its registered	office or registe	ered agent, or both,	
SIGNATU	RE:								
	Electron	ic Signature o	of Registered Ag	ent			Date		
	ation is eligible to		ngible Tax filing rec	quirement a	and elects to	do so (X).			
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	BOWERS, JEF	NG MEADOW DI	R., 2ND FLOOR		Title: Name: Address: City-St-Zip:	BOWERS, JE	ING MEADOW DR		
Title: Name: Address: City-St-Zip:	PD () Delete COSTELLO, JOSEPH M 7100 W. BELLEVIEW AVENUE, STE. 300 D: GREENWOOD VILLAGE, CO 80111 US				Title: Name: Address: City-St-Zip:	() Change () Addition			
Title: Name: Address: City-St-Zip:	e: RUDER, LARRY ess: 12825 FLUSHING MEADOW DR., 2ND FLOOR				Title: Name: Address: City-St-Zip:	ne: ress:			
Title: Name: Address: City-St-Zip:	VD () HAMILTON, T. S 6315 AMHERS AMHERST, GA	Г СТ., #200			Title: Name: Address: City-St-Zip:	() Change () Add	dition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSEPH M. COSTELLO PD 09/13/2002