2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17884

Entity Name: EPS SETTLEMENTS GROUP, INC.

FILED May 09, 2006 Secretary of State

Current Principal Place of Business:				New Princi	New Principal Place of Business:		
7100 E. BEI SUITE 300	LEVIEW AVE	NUE	US				
GREENWOOD VILLAGE, CO 80111 US Current Mailing Address:			New Mailing Address:				
	_				_		
SUITE 300	LLEVIEW AVEI OD VILLAGE,		US				
FEI Number:	95-4134668	FEI Number Ap	oplied For () FEI	Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registe	ered Agent:	Name and	Address of	New Registered Agent:	
SUITE 4	/ICES, INC. UTIVE PARK D FL 33331 US	DRIVE					
The above in the State	named entity su of Florida.	ıbmits this sta	tement for the purpos	se of changing its	s registered	office or registered agent, or both,	
SIGNATUR	E:						
		Signature of	Registered Agent			Date	
	e with s. 607.193(paign Financing		corporation did not rece	ive the prior notice			
OFFICERS AND DIRECTORS:				ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () COSTELLO, JOS 7100 E. BELLEVI GREENWOOD VI	IEW AVENUE, #		Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	CEOD () D BOWERS, JEFFF 12825 FLUSHING SAINT LOUIS, MO	MEADOW DRIN	/E 2ND FLOOR	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	STD () E RUDER, LARRY 12825 FLUSHING ST. LOUIS, MO		2ND FLOOR	Title: Name: Address: City-St-Zip:	COLEMAN, S	SE PARKWAY, STE. 2100	
Title: Name: Address: City-St-Zip:	VD () E HAMILTON, T. SC 5635 PEACHTRE NORCROSS, GA	E PARKWAY, #2	250	Title: Name: Address: City-St-Zip:	DIAMANTIS, 3500 FINANC	(X) Change () Addition CHRISTOPHER E CIAL PLAZA, 4TH FLOOR EE, FL 32312 US	
Title: Name: Address: City-St-Zip:	VD () C COLEMAN, SEAN 6400 POWERS F ATLANTA, GA 30	ERRY ROAD, #	400	Title: Name: Address: City-St-Zip:	SULIVAN, GE 800 W. 6TH	(X) Change()Addition ERALD J STREET, STE. 1800 ES, CA 90017 US	
Title: Name: Address: City-St-Zip:	AS () C GRAVES, LAURIE 7100 E BELLEVIE ENGLEWOOD, C	EW AVENUE #30	00	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LAURIE E. GRAVES AS 05/09/2006