FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P27394 OV 1. Corporation Name

Universal Card Services Corp.

Principal Place of Business

Mailing Address

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90235 039 ***150.00

393664 - 90235 - 39

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

				_		10/07			
2. Principal P	lace of Business	2a. Mailing Address	1	7	(4. FEI Number	787	Ap	plied For
27 8787	Baypine Koad	26 8787 Bayp	ine 1	<u> </u>	7	<i>22-3013</i>	101	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5Certifcate of Status De:	ired	<u>\$8.75</u> /	
22 27						J Oct incate of Otatua De.		Fee Re	quired
City & State City & State				0 1 10		6. Election Campaign Fina	incing _	\$5.00	May Be
Jacksonville, Florida 28 Jacksonville				e, Morida		Trust Fund Contribution		Added t	· .
Zip	Country_ A	Zip 2	Countr	y		8. This corporation owes t	he current year in	ntangible	
Zip ろス:	256 _図 (人SA	29 3 3 256 3	o U	SA		Personal Property Tax.		Yes	□No
	9. Name and Address of Current R				1	0. Name and Address of	New Registered	Agent	
200		- 81	81 Name						
The m	MC								
The Prentice Hall Corporation System, It 1201 Hayes Street				82 Street Address (P.O. Box Number is Not Acceptable)					·- /
1201 Hayes strait				83					
Suite	(05		100	^ (ĺ
5000.0			84	City			——————————————————————————————————————	85 1Zip (Code
Tallar	rassee, F_ 32301	والمستود والمستودين المرادي الرادي المرادي	[.				F\	_ :	
11" Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered									
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
agent. ra	an tattillar, with, and accept the congation	13 01, 00011011 007.0000, 1 10110	Ja Olalbio	. ,					ĺ
SIGNATURE	Signature, typed or printed name of registered agent ar	vi titla il spolicable (NOTE R	enistered Ane	ent signature re	required whe	an reinstating)	DATE		·
12.	OFFICERS AND		13.	- Signolizio (ADDITIONS/CHANGES		ND DIRECTO	RS IN 12
TITLE		X DELETE	1.1 TITLE		Tree	ident and CE		Change	Addition
	SVP Valcahan	VI OLLE I			(- AV	side, Richard	´J.		
NAME	Kevin Keleghan		1.2 NAME	١	Car	of Box voine 12	ad		}
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TITLE			2.1 TITLE	2.1 TITLE TY		Suver	• .	Change	Addition
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	Berkley Heights, NJ 07922			2.93 INCET ADDRESS (Ksonville, Fu	32256	<u> </u>	
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CITY-ST-ZIP	Jacksonville, FL 3235	, , , , , , , , , , , , , , , , , , , 	6.4 CITY-	31-216	l				

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corribration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or one and attachment with an address, with all other like empowered.

SIGNATURE:

3/24/99 (904) 954-8747