FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
Secretary of
DIVISION OF CORPORATION

OCUMENT # P32747
Corporation Name

ENTERPAYMENT SERVICES LIMITED, INC.

SIGNATURE:

FILED Mar 05 1997 8:00am Secretary of State

	1996		Secretary of DIVISION OF CO		Κ	Secret		
4 /	MENT # <i>P3.</i>		() T	· (C		Score	ary of	State
INTER	CPAYMENT S	ERVICES LIM	TITED, II	VC,				
Principal Place	of Business	Mailing Ad Clo Thom Scotia 100 Yonge	dress 25 Cook Gro	up Canad	la			
Thorp PE3 Engl	0 212	Toronto,	STreet Ontario l	45C2W1	•	3. Date Incorporated or Qualified	3a. Date of Last R	
	ace of Business	2a. Malling	Address			4. FEI Number 13 - 3565265	 -	Applied For Not Applicable
Suite, Apt 4	#, etc		Apt. #, etc.	·n·n·		5. Certificate of Status Desired	_□ \$8.75	Additional Regulred
City & State)	City & -	State			Election Campaign Financing Trust Fund Contribution	\$5.0	O May Be
Ζ(p 24	Country 25	Ζ ιρ	31	Country		8. This corporation has liability for Florida Statutes Yes		
4		of Current Registered A		.,		10. Name and Address of New F	Registered Agent	
.5	L 1. 11.	0 ()	·	81 Name	9			
1	lentice 110	rell p St. ssee, FL		82 Stree	t Addres	ss (P.O. Box Number is Not Acceptal	ole)	
10	SOI HOW	Scan III	2220	83			,* ,	-
\ -	allaya.	SSEC / T C	5250	84 City			FL 85 Zi	p Code
or register	ed agent, or both, in the SI	s 607.0502 and 607.1508, late of Florida Such change hs of Section 607.0505, Fl	was authorized b	he above-named by the corporation	corporat s board	tion submits this statement for the pu of directors. I hereby accept the app	rpose of changing its i ointment as registered	registered office I agent. I am
SIGNATURE	- KEV	SETTINA	. Mc Gust	9 ./			20 . / 1	1586
		egisterce agent a stittle if applicable.	(NOTE: R	agistered Agent a-gnature	e required v		DATE	i
12.	OFF	ICERS AND DIRECTORS	7 85 55	13.		ADDITIONS/CHANGES TO OFF		
THILE	ANTHONY I. JO	Sulares of] DELETE	1. 1 TITLE			☐ Change	Addition :
NAME:	HN IHON J II. VO	CERTIFIED		1.2 NAME				
STREET ADDRESS	45 BECKELEY -	PIREEI	\	1.3 STREET ADDRESS	3			Į į
CHY+S*-ZiP	CONDON WIA	IEB ENGLAN	*************************	1.4 CITY-ST-ZIP	<u> </u>			i
TITLE	D Tour (A A Fi] DELETE	2. 1 TITLE			☐ Change	Addition
NA PROPERTY OF THE PROPERTY OF	JOHN A. MCEN	VAN		2.2 NAME				
STREET ADDRESS	1.0. Box 36 7	norpewood	England	2 3 STREET ADDRESS	3			1
TOTAL	rex-borough	PE365B B] DELETE	2.4 CITY-ST-ZIP			Change	C Addition
NAME	Carolona H K	ider					[] Cuante	Addition
STREET ADDRESS	Us Re-keley	street		3.2 NAME 3.3. STREET ADDRESS				
COY-ST-7IP	LONDAN WIA	ider Street IEB ENGLAN))	34 CITY-ST-ZIP	"			1
TILE	5	7	1 DELETE	4. 1 TiTLE		No.	☐ Change	Addition
NAME A	TAN SOIGHT	_		4.2 NAME			<u></u>	
STREET AUDRESS	P.O. BOX 36	Thorpewood		4.3 STREET ADDRESS	;			
CITY-ST-ZIP	Peterborough	Thorpewood PE3 65B Em	and	4.4 CITY - ST - ZIP				
10.6	,		DELETE	5 1 TITLE			Change	Addition
N4ME				52 NAME		30000210 -03/05/97010	J5455	
STHEET ADDRESS				5 3 STREET ADDRESS		***165.00) (5~~ひろひ	
CHY+ST-ZIP				5.4 CITY-ST-ZIP		<u>∿</u> ⊕₹100.UU		
TirLt]] DELETE	6. 1 TITLE			☐ Cha	(dition
NAME				6.2 NAME			13	~%\
STREET ADDVESS		<i>-</i>		6 3 STREET ADDRESS			\cup_{ℓ_i}	ייאן
CITY - ST - ZIP		, MC Cayen	- 9/9 <i>(</i> 90	6.4 CiTY - ST - ZiP			(ハ
the Loo hereb certify that	by certify that the information t the information indicated	n supplied with this filling is: on this annual good or sun	voluntarily Turnishe b iolyshi al annual re	d and does not queport is true and a	alify for	the exemption stated in Section 119 and that my signature shall have the	.07(3)(k), Florida Statut	es. I further
oath; that appears in	Larn an officer or drector. Block 12 or Block 1977	of the corporation of the rec langed, or polar attrictmen	eiver or hustee em it with an address	powered to execu	ute this i	the exemption stated in Section 119 and that my signature shall have the report as required by Chapter 607, Fi	orida Statutes; and that	at my name

ROBERT G. R. PACK, ALLOWS