

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P94000028236**

1. Entity Name

GLOBAL CARD SERVICES, INC.

Principal Place of Business

Mailing Address

520 N. SEMORAN BLVD. STE 200
ORLANDO FL 32807 USA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

MARSHALL, WILLIAM J. (CEO)
GLOBAL CARD SERVICES, INC.
520 N. SEMORAN BLVD., STE 200
ORLANDO FL 32807

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0488384

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11.

OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

CHIEF EXECUTIVE OFFICER ☐ Delete

WILLIAM J. MARSHALL

C/O GLOBAL CARD SERVICES, INC. ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PRESIDENT ☐ Delete

MARK SILVERMAN

C/O GLOBAL CARD SERVICES, INC. ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

13. I hereby 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 report or supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK SILVERMAN 07/21/00 (407) 206-7700

CR2E034 (9/99)

P44000028236 Attachment

70670011

GLOBAL CARD SERVICES INC
520 N SEMORAN BLVD
STE 200
ORLANDO, FL 32807

Request taken by: yfisher
07-14-2000

The forms you recently requested from this office are:

(1) 201. COR Profit A/R

Should you have any questions or need any further information,
please contact us at the address below:

- Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

PA4000528236 Attachment



July 21, 2000

Uniform Business Report
Division of Corporations
Box 1500
Tallahassee FL 32302-1500

RE: UBR 2000 Filing

Gentlemen:

We have enclosed the Uniform Business Report for the year 2000.

This is the first and only copy of the UBR that we have received. We called your office to question and obtain a form. Your representative told us to send this form with the \$150 filing fee, as well as this letter of explanation.

We apologize for the delay, and for any inconvenience we may have caused.

Sincerely,

A handwritten signature in cursive script that reads "Sunny Castillo".

Sunny Castillo
Accounting Manager

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