

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000087748

Entity Name: P.O.S. INTERNATIONAL, INC.

FILED
May 06, 2008
Secretary of State

Current Principal Place of Business:

3558 NE 12TH AVE
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

3558 NE 12TH AVE
STE 103
FORT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 65-0536232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, MICHAEL
3558 N E 12TH AVE
FORT LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

TURNER, MICHAEL
3558 N E 12TH AVE
OAKLAND PARK, FL 33334 US

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: _____

05/06/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TURNER, MICHAEL
Address: 2500 N FEDERAL HWY STE 103
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: VD () Delete
Name: FITZGERALD, THOMAS
Address: 2500 N FEDERAL HWY STE 103
City-St-Zip: FORT LAUDERDALE, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TURNER, MICHAEL
Address: 3558 NE 12TH AVE
City-St-Zip: OAKLAND PARK, FL 33334

Title: VD (X) Change () Addition
Name: FITZGERALD, THOMAS
Address: 3558 NE 12TH AVE
City-St-Zip: OAKLAND PARK, FL 33308

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL TURNER

PD

05/06/2008

Electronic Signature of Signing Officer or Director

Date