2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000065340

1. Entity Name

MERCHANT SERVICES AND SYSEMS, INC.



FILED Jan 24, 2008 08:00 AN Secretary of State

Principal Place of Business

1425 ARTHUR STREET

SUITE 116

HOLLYWOOD, FL 33020

Mailing Address

1425 ARTHUR STREET

SUITE 116

HOLLYWOOD, FL 33020 U



01062008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0629933 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

GRUBER, MICHAEL G 1425 ARTHUR STREET SUITE 116 HOLLYWOOD, FL 33020

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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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NDTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan- Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTS GRUBER, MICHAEL G 1425 ARTHUR STREET #116 HOLLYWOOD, FL 33020			000000796110 01/29/08-80019-011 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE Name Street address City-St-Zip				·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				-	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SKINING OFFICER OR DIRECTO

01-06-08 954-927-184

Daytime Pho

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