


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90103 009 ***158.00

DOCUMENT # V08706

1. Entity Name
TOTAL SYSTEMS, INC.



Principal Place of Business
**7501 NW 4TH STREET
SUITE 210
PLANTATION, FL 33317**

Mailing Address
**1100 Sunset Strip
Suite 5
SUITE 210
PLANTATION, FL 33317**

40079568



DO NOT WRITE IN THIS SPACE

04092008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1125243

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HAMMOND ERIC J
4770 NW 21 STREET
#111
LAUDERHILL, FL 33313**

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IN THIS SPACE**

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. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HAMMOND, ERIC J
STREET ADDRESS	4770 NW 21 STREET, #111
CITY-ST-ZIP	LAUDERHILL, FL 33313
TITLE	D
NAME	HAMMOND, CLAUDETTE E
STREET ADDRESS	4770 NW 21 STREET, #111
CITY-ST-ZIP	PLANTATION, FL 33313
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 or 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: *Claudette Hammond/Vice Pres, dated 4/10/08 (954) 327-8004*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #