

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000058558

Entity Name: WAVECREST PAYMENT SERVICES OF THE AMERICAS, INC.

Current Principal Place of Business:

300 SOUTH ORANGE AVENUE
SUITE 1000
ORLANDO, FL 32801

Current Mailing Address:

300 SOUTH ORANGE AVENUE
SUITE 1000
ORLANDO, FL 32801 US

FEI Number: 27-1967468

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAUTTER, CHRISTIAN C
2850 NORTH ANDREWS AVENUE
WILTON MANORS, FL 33311 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DIRECTOR
Name RACINE, JOHN
Address 12 TUCKEY'S LANE STE 2B
City-State-Zip: GIBRALTAR

I hereby 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 all other like empowered.

SIGNATURE: JOHN RACINE

CHAIRMAN

03/04/2019

Electronic Signature of Signing Officer/Director Detail

Date