

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000021800

Entity Name: M2 PAYMENT SOLUTIONS, INC.

Current Principal Place of Business:

7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702

Current Mailing Address:

7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 US

FEI Number: 27-2374202

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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: DAVID ROBERTS

02/16/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GONCHARIK, YELENA
Address 3 HARVEST DRIVE
City-State-Zip: NORTH ANDOVER MA 01845

Title SECRETARY
Name TINA
Address 14167 BARONESS CT
City-State-Zip: ORLANDO FL 32828

Title TREASURER
Name GONCHARIK, YELENA
Address 3 HARVEST DRIVE
City-State-Zip: NORTH ANDOVER MA 01845

Title DIRECTOR
Name GONCHARIK, YELENA
Address 3 HARVEST DRIVE
City-State-Zip: NORTH ANDOVER MA 01845

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: YELENA GONCHARIK

PRESIDENT

02/16/2024

Electronic Signature of Signing Officer/Director Detail

Date