

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2005 8:00 am
Secretary of State

03-09-2005 90036 012 ***158.75

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1. Entity Name
NET 1 UEPS TECHNOLOGIES, INC.



Principal Place of Business
**C/O SCHNEIDER WEINBERGER LLP
2200 CORPORATE BLVD. NW #210
BOCA RATON, FL 33431**

Mailing Address
**C/O SCHNEIDER WEINBERGER LLP
2200 CORPORATE BLVD. NW #210
BOCA RATON, FL 33431**

40029139



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02162005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCHNEIDER, JAMES M ESQ
C/O SCHNEIDER WEINBERGER LLP
2200 CORPORATE BLVD. NW #210
BOCA RATON, FL 33431**

7. Name and Address of New Registered Agent

Name
JAMES M. SCHNEIDER ESQ
Street Address (P.O. Box Number is Not Acceptable)
SCHNEIDER WEINBERGER & DEILY LLP
2200 CORPORATE BLVD, NW, #210
City
BOCA RATON FL Zip Code
33431

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)

03-04-05

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD GUERARD, CLAUDE 20 AVENUE POZZO DI BORGO SAINT CLOUD, FR 92210	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BELAMANT, SERGE 4TH FLOOR NORTH WING, PRESIDENT PLACE ROSEBANK, JOHANNESBURG, SA	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS ANTHONY, DAVID 744 WEST HASTINGS ST., STE 325 VANCOUVER, BC, CA v6c1a5	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALL, CHARLES ANTHONY 9 FRICKER ROAD, ILLOVO BLVD ILLOVO, SANDTON 2196 SA	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMART, CHAD LEONARD 9 FRICKER ROAD, ILLOVO BLVD ILLOVO, SANDTON 2196 SA	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD KOTZE, HERMAN GIDEON 4TH FLOOR, NORTH WING, PRESIDENT PLACE ROSEBANK, JOHANNESBURG, SA	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NON-EXECUTIVE DIRECTOR PEIN, ALASDAIR JONATHAN KEMSLEY 33 RIVERSIDE AVENUE WESTPORT, CT, 06880, USA	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NON-EXECUTIVE DIRECTOR SEABROOKE, CHRISTOPHER STEFAN 4 COMMERCE SQUARE, 39 RIVONIA ROAD SANDHURST, SANDTON, 2196 SA	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Herman Kotze

February 16, 05

Date

011 27 11
343 2000
Daytime Phone #