

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 09, 2008  
Secretary of State**

DOCUMENT# L05000069970

Entity Name: ATM INVESTMENTS, LLC

**Current Principal Place of Business:**

1820 NORTH CORPORATE LAKES BLVD. STE. 207  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1820 NORTH CORPORATE LAKES BLVD. STE. 207  
WESTON, FL 33326

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

TORREALBA, AQUILES  
1820 NORTH CORPORATE LAKES BLVD. STE. 207  
WESTON, FL 33326    US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title:                      MGR                      ( ) Delete  
Name:                      TORREALBA, AQUILES R  
Address:                      1820 NORTH CORPORATE LAKES BLVD. STE. 207  
City-St-Zip:                      WESTON, FL 33326

**ADDITIONS/CHANGES:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: AQUILES TORREALBA

MGR

05/09/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date