2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# L06000075094

Entity Name: COIN ATM, LLC

Current Principal Place of Business:

8211 W. BROWARD BLVD. SUITE PH4
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

8211 W. BROWARD BLVD. SUITE PH4
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOYLE, DANIEL T
1000 S. PINE ISLAND ROAD
#450
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

DOYLE, DANIEL T
8211 W. BROWARD BLVD PHR
PLANTATION, FL 33324 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: DANIEL DOYLE 04/24/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: KOLEOS, DANIEL J
Address: 1000 S. PINE ISLAND RD., #450
City-St-Zip: PLANTATION, FL 33324 US

Title: MGR ( ) Delete
Name: KOLEOS, DEBORAH A
Address: 1000 S. PINE ISLAND RD., #450
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: KOLEOS, DANIEL J
Address: 8211 W. BROWARD BLVD.
City-St-Zip: PLANTATION, FL 33324 US

Title: MGR (X) Change ( ) Addition
Name: KOLEOS, DEBORAH A
Address: 8211 W. BROWARD BLVD. PH4
City-St-Zip: PLANTATION, FL 33324 US

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: DANIEL J KOLEOS MGR 04/24/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date