

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000007013

FILED
Apr 11, 2007
Secretary of State

Entity Name: DIGITAL KIOSK TECHNOLOGIES, LLC

Current Principal Place of Business:

320 N. MERIDAN STREET, SUITE 212
INDIANAPOLIS, IN 46204

New Principal Place of Business:

Current Mailing Address:

320 N. MERIDAN STREET, SUITE 212
INDIANAPOLIS, IN 46204

New Mailing Address:

FEI Number: 05-0606336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: MGRM () Delete
Name: DIGITAL MEDIA MANAGE, MENT
Address: 320 N. MERIDAN STREET, SUITE 212
City-St-Zip: INDIANAPOLIS, IN 46204

Title: CEO () Delete
Name: MEYER, PHILIP
Address: 320 N. MERIDAN STREET, SUITE 212
City-St-Zip: INDIANAPOLIS, IN 46204

Title: P (X) Delete
Name: RUSH, GARY
Address: 320 N. MERIDAN STREET, SUITE 212
City-St-Zip: INDIANAPOLIS, IN 46204

Title: VP () Delete
Name: HURST, CATHY
Address: 320 N. MERIDAN STREET, SUITE 212
City-St-Zip: INDIANAPOLIS, IN 46204

Title: VP () Delete
Name: HUNTLEY, JASON
Address: 320 N. MERIDAN STREET, SUITE 212
City-St-Zip: INDIANAPOLIS, IN 46204

ADDITIONS/CHANGES:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TIM MORAN

CONT

04/11/2007

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