2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094650

Entity Name: INTEGRATED ATM'S GROUP, INC.

FILED Apr 28, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
| | |

18297 NW 61ST PL 5261 NW 188 ST

HIALEAH, FL 33015 OPA LOCKA, FL 33055

Current Mailing Address: New Mailing Address:

18297 NW 61ST PL 5261 NW 188 ST

HIALEAH, FL 33015 OPA LOCKA, FL 33055

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

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

RAND, ANDREW 8340 SW 41ST STREET DAVIE, FL 33328 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: MARTINEZ, ELWIN Name: MARTINEZ, ELWIN

 Address:
 18297 NW 61ST PL
 Address:
 5261 NW 188 ST

 City-St-Zip:
 HIALEAH, FL 33015
 City-St-Zip:
 OPA LOCKA, FL 33055

Title: D () Delete Title: D (X) Change () Addition Name: ZURITA, JENNIFER Name: ZURITA, JENNIFER

 Name:
 ZURITA, JENNIFER
 Name:
 ZURITA, JENNIFER

 Address:
 18297 NW 61ST PL
 Address:
 5261 NW 188 ST

 City-St-Zip:
 HIALEAH, FL 33015
 City-St-Zip:
 OPA LOCKA, FL 33055

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ELWIN MARTINEZ D 04/28/2004