
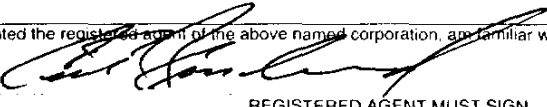
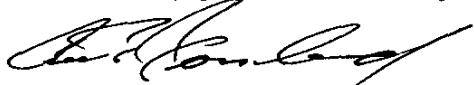


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000035577			
1. Corporation Name AUTOMATED TELLER MACHINE SERVICES CORP.			
Principal Place of Business 401 N.E. Mizner Blvd. Suite #T709 Boca Raton, FL 33486		Mailing Address 401 N.E. Mizner Blvd. Suite #T709 Boca Raton, FL 33486	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country	
		4. Date Incorporated or Qualified To Do Business in Florida <div style="text-align: right;">April 21, 1997</div>	
		5. FEI Number 65-0753509	
		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	Curt Rossband	401 N.E. Mizner Blvd. Suite #T709	Boca Raton, FL 33486
S/T	Greg Mitelman	660 Bertrand St.	Montreal, Canada H4M1V8
8. Name and Address of Current Registered Agent Mindy L. Pallot 801 Brickell Ave. Suite #1501 Miami, FL 33131		9. Name and Address of New Registered Agent Name Curt Rossband Street Address (P.O. Box Number is Not Acceptable) 401 N.E. Mizner Blvd. Suite, Apt. #, Etc. Suite #T709 City Boca Raton State FL Zip Code 33486	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent:  Date: 5/19/99 <div style="text-align: center;">REGISTERED AGENT MUST SIGN</div>			
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)			
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: 		5/14/99 (561) 866-8879 Date Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2E081 (12/98)