

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000004892

FILED  
Apr 15, 2002 8:00 AM  
Secretary of State

Entity Name: 2TOUCH1, LLC

## Current Principal Place of Business:

P.O. BOX 162  
POMPANO BEACH, FL 33061

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 162  
POMPANO BEACH, FL 33061

## New Mailing Address:

FEI Number: 65-1004261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAMS, VENOL C ESQUIRE  
5546 W. OAKLAND PARK BLVD., #220  
LAUDERHILL, FL 33313 US

## Name and Address of New Registered Agent:

ADAMS, VENOL C ESQUIRE  
7491 W. OAKLAND PARK BLVD., #301  
LAUDERHILL, FL 33319 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:

04/15/2002

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: BRAMWELL, DWAIN A TREA  
Address: P.O. BOX 162  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: MGR ( ) Delete  
Name: EDWARDS, ANDRE L MANAGER  
Address: P.O. BOX 162  
City-St-Zip: POMPANO BEACH, FL 33062 US

## ADDITIONS/CHANGES:

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 Section 119.07(3)(i), 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: DWAIN BRAMWELL

MGR

04/15/2002

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