

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107949

FILED  
Feb 04, 2010  
Secretary of State

Entity Name: NO TOUCH, LLC

**Current Principal Place of Business:**

815 N HOMESTEAD BLVD #506  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

815 NORTH HOMESTEAD BLVD  
#506  
HOMESTEAD, FL 33030

**New Mailing Address:**

FEI Number: 20-3991801

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LYNN, JOHN MICHAEL  
830 NORTH KROME AVENUE  
HOMESTEAD, FL 33030 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  
Name: BECKER, PAUL  
Address: 815 NORTH HOMESTEAD BLVD #506  
City-St-Zip: HOMESTEAD, FL 33030

Title: MGRM  
Name: BECKER, MARIE  
Address: 815 NORTH HOMESTEAD BLVD #506  
City-St-Zip: HOMESTEAD, FL 33030

I hereby 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: MARIE BECKER

MGRM

02/04/2010

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