2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State
04-27-2006 90210 035 ****70.00

DOCUMENT # N02000007478

1. Entity Name
TONI'S TOUCH, INC

Principal Place of Business	Mailing Address
2506 MARTINWOOD DRIVE ORLANDO, FL 32808 US	2506 MARTINWOOD DRIVE ORLANDO, FL 32808 US

03292006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
306 N. TAMPA Ave	2506 MARTINWOOD Dr.
Suite, Apt. #, etc.: Building #2	Suite, Apt. #, etc.
City & State: Orlando, FLORIDA	City & State: Orlando, FLORIDA
Zip: 32805 Country: USA	Zip: 32808 Country: USA

4. FEI Number: 51-0423003 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WILSON, ANTOINETTE O 2506 MARTINWOOD DRIVE ORLANDO, FL 32808	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Antoinette Wilson (Antoinette Wilson) CEO 3/29/2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTIN-JONES, ANITA MS. 409 CYPRESS AVENUE SANFORD, FL 32771	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~GUERLINE RIDDLE~~ ☒ Change ☒ Addition ~~2900 Woodbridge Ln~~ ~~Orlando, FL 32808~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEE-WELCH, SHIRLEY M 3018 PEMBROOK DRIVE ORLANDO, FL 32810	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REGINA THOMAS 1905 S Kirkman Rd, Apt. #514 Orlando, FL 32811 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEPHENS, KATRINA 3027 TRUMAN STREET SANFORD, FL 32771	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~GUERLINE RIDDLE~~ ☐ Change ☒ Addition ~~2900 Woodbridge Ln~~ ~~683225~~ ~~Orlando, FL 32808~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMAS, REGINA 3200 OLD WINTER GARDEN ROAD APT #2812 OCOEE, FL 34761	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUERLINE RIDDLE P.O. Box 683225 ORLANDO, FL 32868 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TOMPKINS, ROCHELLE 3008 MESSINA AVENUE ORLANDO, FL 32811	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEBALLO, YVONNE 3517 SALTLAKE COURT ORLANDO, FL 32810	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

(407) 468-5382

SIGNATURE: Antoinette Wilson (Antoinette Wilson) CEO, 3/29/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #