2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# N03000001134

Entity Name: ANGEL TOUCH FOUNDATION, INC.

Current Principal Place of Business:

13253 SW 111 TERR., #3
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

12973 SW 112 ST
#385
MIAMI, FL 33186

New Mailing Address:

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

Name and Address of Current Registered Agent:

NOLLA, JULIO A
6724 SW 134 PLACE
MIAMI, FL 33183 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

OFFICERS AND DIRECTORS:

Title: DS ( ) Delete
Name: PEREZ, YOLANDA N
Address: 9184 SW 128 LANE
City-St-Zip: MIAMI, FL 33176

Title: DT ( ) Delete
Name: AMADO-PICANS, YOLANDA
Address: 13253 SW 111 TERR. #3
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: AMADO, MARIA E
Address: 14642 SW 172 LANE
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete
Name: AMADO, MARIA I
Address: 13000 SW 92 AVE #302B
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete
Name: LAUSELL, YVONNE
Address: 700 BILTMORE WAY PH 1210
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YOLANDA PEREZ DS 04/18/2007

Electronic Signature of Signing Officer or Director — Date