2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2012
Secretary of State

DOCUMENT# P01000049785

Entity Name: EVERLASTING TOUCH INC.

Current Principal Place of Business:

1820 RIGGINS ROAD
SUITE 2
TALLAHASSEE, FL 32308

New Principal Place of Business:

1332 NORTH BRONOUGH STREET
TALLAHASSEE, FL 32303

Current Mailing Address:

1820 RIGGINS ROAD
SUITE 2
TALLAHASSEE, FL 32308

New Mailing Address:

PO BOX 4211
TALLAHASSEE, FL 32315

FEI Number: 30-0001393 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURNS, TRACY E
7416 HICKOCK CT.
TALLAHASSEE, FL 32311 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: P
Name: BURNS, DJENABA A
Address: 7416 HICKOCK CT
City-St-Zip: TALLAHASSEE, FL 32311

Title: C
Name: BURNS, TRACY E
Address: 7416 HICKOCK CT.
City-St-Zip: TALLAHASSEE, FL 32311

Title: D
Name: BAKER, NZINGA D
Address: 6947 MARY CAROLINE CIRCLE UNIT G
City-St-Zip: ALEXANDRIA, VA 22310

Title: D
Name: BAKER, LORETTA F
Address: 6824 CROSSMOOR LANE
City-St-Zip: LOUISVILLE, KY 40222

Title: D
Name: BAKER, ROBERT M
Address: 6824 CROSSMOOR LANE
City-St-Zip: LOUISVILLE, KY 40222

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DJENABA A BURNS P 03/14/2012

Electronic Signature of Signing Officer or Director Date