

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000049491

FILED
Apr 24, 2008
Secretary of State

Entity Name: TOUCH OF 2, CORP.

Current Principal Place of Business:

1330 WEST AVE
APT 2708
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1330 WEST AVENUE
APT 2708
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 03-0454103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEFELICE, MARIA THERESA
1330 WEST AVENUE
APT 2708
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROCHE, LUDOVIC A
Address: 1330 WEST AVENUE, SUITE 2708
City-St-Zip: MIAMI BEACH, FL 33139

Title: S,T () Delete
Name: RICCITELLI, MAURIZIO
Address: 1330 WEST AVENUE, SUITE 2708
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: RICCITELLI, MAURIZIO
Address: 1330 WEST AVENUE, SUITE 2708
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUDOVIC ROCHE

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date