

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069924

FILED
Apr 01, 2005
Secretary of State

Entity Name: THE GLAMOROUS TOUCH, INC.

Current Principal Place of Business:

2512 CENTERGATE DR
101
MIRAMAR, FL 33025

New Principal Place of Business:

1070 THREE FORKS CT
ST AUGUSTINE, FL 32092

Current Mailing Address:

PO BOX 1157
HALLANDALE, FL 33008

New Mailing Address:

1070 THREE FORKS CT
ST AUGUSTINE, FL 32092

FEI Number: 04-3693276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELIAS, HELEN
PO BOX 1157
HALLANDALE, FL 33008 US

Name and Address of New Registered Agent:

ELIAS, HELEN
1070 THREE FORKS CT
ST AUGUSTINE, FL 32092 US

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: HELEN ELIAS

04/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: ELIAS, HELEN
Address: PO BOX 1157
City-St-Zip: HALLANDALE, FL 33008 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ELIAS, HELEN
Address: 1070 THREE FORKS CT
City-St-Zip: ST AUGUSTINE, FL 32092 US

Title: VP () Change (X) Addition
Name: TOL, FLORIN
Address: 1070 THREE FORKS CT
City-St-Zip: ST AUGUSTINE, FL 32092

Title: DIR () Change (X) Addition
Name: FIALLO, JACQUELINE
Address: 110 MASON CT
City-St-Zip: TEMPLE, GA 30179

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HELEN ELIAS

P

04/01/2005

Electronic Signature of Signing Officer or Director

Date