


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90372 008 \*\*\*150.00

DOCUMENT # P02000103771					
1. Entity Name <b>NATURAL TOUCH, INC.</b>					
Principal Place of Business <b>335 S BISCAYNE BLVD APT 3312 MIAMI, FL 33131</b>			Mailing Address <b>808 BRICKELL KEY DR. #3007 MIAMI, FL 33131</b>		
2. Principal Place of Business - No P.O. Box # <b>1900 N. Bayshore Dr.</b>		3. Mailing Address <b>1900 N. Bayshore Dr.</b>			
Suite, Apt. #, etc. <b>1401</b>		Suite, Apt. #, etc. <b># 1401</b>			
City & State <b>Miami, Florida</b>		City & State <b>Miami, Florida</b>			
Zip <b>33132</b>		Country <b>U.S.</b>		Zip <b>33132</b>	
Country <b>U.S.</b>		4. FEI Number <b>35-2182470</b>			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>TABOADA, GLORIA 335 S BISCAYNE BLVD APT 3312 MIAMI, FL 33131</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) <b>1900 N. Bayshore Dr.</b> <b>Apt. 1401</b> City <b>Miami</b>		
FL			Zip Code <b>33132</b>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE <b>D</b>	NAME <b>TABOADA, GLORIA</b>		<input checked="" type="checkbox"/> Delete	TITLE <b>D. Taboada Gloria</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>335 S BISCAYNE BLVD APT 3312</b>	CITY-ST-ZIP <b>MIAMI, FL 33131</b>			NAME <b>1900 N. Bayshore Dr.</b>	
CITY-ST-ZIP <b>MIAMI, FL 33131</b>				STREET ADDRESS <b>Apt 1400</b>	
CITY-ST-ZIP <b>MIAMI, FL 33131</b>				CITY-ST-ZIP <b>miami, Florida 33132</b>	
TITLE <b>D</b>	NAME <b>GONZALEZ, ORLANDO</b>		<input checked="" type="checkbox"/> Delete	TITLE <b>D Gonzalez Orlando</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>335 S BISCAYNE BLVD #3312</b>	CITY-ST-ZIP <b>MIAMI, FL 33131</b>			NAME <b>1900 N. Bayshore Dr.</b>	
CITY-ST-ZIP <b>MIAMI, FL 33131</b>				STREET ADDRESS <b>Apt. 1400</b>	
CITY-ST-ZIP <b>MIAMI, FL 33131</b>				CITY-ST-ZIP <b>miami, Florida 33132</b>	
TITLE 	NAME 		<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 			NAME 	
CITY-ST-ZIP 				STREET ADDRESS 	
CITY-ST-ZIP 				CITY-ST-ZIP 	
TITLE 	NAME 		<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 	CITY-ST-ZIP 			NAME 	
CITY-ST-ZIP 				STREET ADDRESS 	
CITY-ST-ZIP 				CITY-ST-ZIP 	
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 607, 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.					
SIGNATURE: <u><i>Gloria Taboada</i></u> <b>Gloria Taboada, director</b> <u>4/17/08</u>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					