

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000010976

1. Entity Name
PERSONAL TOUCH PRO SERVICES CORP.



Principal Place of Business
4379 SW 10TH PLACE #106
DEERFIELD BEACH, FL 33442 US

Mailing Address
4379 SW 10TH PLACE #106
DEERFIELD BEACH, FL 33442 US



DO NOT WRITE IN THIS SPACE

02032005 No Chg-P CR2E034 (10/03)

4. FEI Number
43-1994443

Applied For
Not Applied

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PASCOAL, HELIO
4379 SW 10TH PLACE #106
DEERFIELD BEACH, FL 33442

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IN THIS SPACE

3. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
PASCOAL, HELIO
4379 SW 10TH PLACE #106
DEERFIELD BEACH, FL 33442

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSD
PASCOAL, ZELMA I
4379 SW 10TH PLACE #106
DEERFIELD BEACH, FL 33442

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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05/05/05-80086-014 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 1 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Helio Pascoal
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Helio PASCOAL

02-25-05

Date

754-264-6741
Daytime Phone #