

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2004 8:00 am**  
**Secretary of State**

02-17-2004 90045 006 \*\*\*150.00

**DOCUMENT # P03000081984**

1. Entity Name

ALLEN'S TOUCH UP, INC



Principal Place of Business

607 HATTAWAY DRIVE  
ALTAMONTE SPRINGS FL 32701

Mailing Address

607 HATTAWAY DRIVE  
ALTAMONTE SPRINGS FL 32701

2. Principal Place of Business

17811 Adams St.

3. Mailing Address

17811 Adams St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Winter Garden, FL

City & State

Winter Garden, FL

Zip

34787

Country

US

Zip

34787

Country

US

4. FEI Number

20-0111432

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required



MOORE

CR2E034 (11/03)

6. Name and Address of Current Registered Agent

WHITE, ALLEN R  
607 HATTAWAY DRIVE  
ALTAMONTE SPRINGS FL 32701

7. Name and Address of New Registered Agent

Name

White, Allen R

Street Address (P.O. Box Number is Not Acceptable)

17811 Adams St.

City

Winter Garden

FL

Zip Code

34787

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

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, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME WHITE, ALLEN R  
STREET ADDRESS 607 HATTAWAY DRIVE  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

TITLE ST ☐ Delete  
NAME WHITE, ANGELA L  
STREET ADDRESS 607 HATTAWAY DRIVE  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME White, Allen R  
STREET ADDRESS 17811 Adams St.  
CITY-ST-ZIP Winter Garden, FL 34787

TITLE ST ☒ Change ☐ Addition  
NAME White, Angela K.  
STREET ADDRESS 17811 Adams St.  
CITY-ST-ZIP Winter Garden, FL 34787

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Allen R White*

ALLEN R WHITE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/11/04

Daytime Phone #

407-656-2874