

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120231

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: MASTER'S TOUCH PROFESSIONAL PHOTOGRAPHERS, INC.

## Current Principal Place of Business:

8783 COCO PLUM PLACE  
ORLANDO, FL 32827

## New Principal Place of Business:

4993 SOUTH ORANGE AVENUE  
ORLANDO, FL 32806

## Current Mailing Address:

8783 COCO PLUM PLACE  
ORLANDO, FL 32827

## New Mailing Address:

4993 SOUTH ORANGE AVENUE  
ORLANDO, FL 32806

FEI Number: 57-1191187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCH HELFER, PA  
215 ROMANO AVENUE  
CORAL GABLES, FL 33134 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: FELIPE, GIOVANNI  
Address: 8783 COCO PLUM PLACE  
City-St-Zip: ORLANDO, FL 32827

Title: VP ( ) Delete  
Name: FELIPE, ILEANA  
Address: 8783 COCO PLUM PLACE  
City-St-Zip: ORLANDO, FL 32827

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FELIPE, ILEANA  
Address: 8783 COCO PLUM PLACE  
City-St-Zip: ORLANDO, FL 32827

Title: VP (X) Change ( ) Addition  
Name: FELIPE, GIOVANNI III  
Address: 8783 COCO PLUM PLACE  
City-St-Zip: ORLANDO, FL 32827

Title: SEC ( ) Change (X) Addition  
Name: PUPO, LEANE  
Address: 8783 COCO PLUM PLACE  
City-St-Zip: ORLANDO, FL 32827

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: ILEANA FELIPE

P

01/04/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date