

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000125278

Entity Name: M.M. CUSTOM TOUCH INC.

FILED  
Oct 28, 2004  
Secretary of State

## Current Principal Place of Business:

19800 VETERANS BLVD.  
SUITE C-6  
PORT CHARLOTTE, FL 33954 US

## New Principal Place of Business:

## Current Mailing Address:

19800 VETERANS BLVD.  
SUITE C-6  
PORT CHARLOTTE, FL 33954 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALES, MIGUEL  
19800 VETERANS BLVD.  
SUITE C-6  
PORT CHARLOTTE, FL 33954 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D,P ( ) Delete  
Name: MORLAES, MIGUEL  
Address: 21628 EDGEWATER DRIVE  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: D,VP ( ) Delete  
Name: MORALES, GINA  
Address: 21628 EDGEWATER DRIVE  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GINA MORALES

DVP

10/28/2004

Electronic Signature of Signing Officer or Director

Date