

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000131332 1. Entity Name MIDAS TOUCH FINANCIAL, INC.	
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Principal Place of Business 3702 S. VIRGINIA STREET STE. G12-401 RENO, NV 89502	Mailing Address 3702 S. VIRGINIA STREET STE. G12-401 RENO, NV 89502
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DO NOT WRITE IN THIS SPACE



01212008 No Chg-P CR2E034 (11/05)

4. FEI Number 72-1574970	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PARACORP INCORPORATED 236 EAST 6TH AVE. TALLAHASSEE, FL 32303

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IN THIS SPACE**

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 _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000900549 04/29/08-80033-016 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLEMING, RENALDO P.O. BOX 7277 PORT ST. LUCIE, FL 34985
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLEMING, VALERIE P.O. BOX 7277 PORT ST. LUCIE, FL 34985
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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>Renaldo Fleming</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>4/14/08</u> Date	<u>772-785-7923</u> Daytime Phone #
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