2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000138580

Entity Name: ONE TOUCH ELECTRICAL CONTRACTORS, INC.

FILED Aug 28, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

22563 SW 66 AVE 608 ASBURYWAY

309 BOYNTON BEACH, FL 33426 US

BOCA RATON, FL 33428 US

Current Mailing Address: New Mailing Address:

22563 SW 66 AVE 608 ASBURYWAY

309 BOYNTON BEACH, FL 33426 US

BOCA RATON, FL 33428 US

FEI Number: 90-0124771 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLOREXIL, JOVEL
22563 SW 66 AVE
608 ASBURYWAY

309 BOYNTON BEACH, FL US

BOCA RATON, FL 33428 US

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: JOVEL FLOREXIL 08/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO () Delete Title: CEO (X) Change () Addition

 Name:
 FLOREXIL, JOVEL H
 Name:
 FLOREXIL, JOVEL H

 Address:
 22563 SW 66 AVE
 Address:
 608 ASBURYWAY

City-St-Zip: BOCA RATON, FL 33428 US City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: P (X) Delete Title: () Change () Addition

 Name:
 DOLAN, LARRY
 Name:

 Address:
 3895 BLACK FOREST CICLE
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 3436 US
 City-St-Zip:

Title: V (X) Delete Title: () Change () Addition

 Name:
 SAINTIL, ERNTZ
 Name:

 Address:
 3088 SW CIRCLE STREET
 Address:

 City-St-Zip:
 PORT- ST-LUCIE, FL 34953 US
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 EARLY, WILLIAM T
 Name:

 Address:
 188 MOCKINGBIRD TRAIL SOUTH
 Address:

 City-St-Zip:
 FROSTPROOF, FL 33843 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOVEL FLOREXIL P 08/28/2006