


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 08:00 A
Secretary of State

DOCUMENT # P04000051872	
1. Entity Name THE POWER OF TOUCH ENTERPRISE, INC.	

Principal Place of Business 671 SW 29TH TERR FT LAUDERDALE, FL 33312	Mailing Address 671 SW 29TH TERR FT LAUDERDALE, FL 33312
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DO NOT WRITE IN THIS SPACE



03272007 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0719111	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ORLANDO-PRATT, DOLLY M
671 SW 29TH TERR
FT LAUDERDALE, FL 33312

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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, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000703151 04/20/07-80129-015 150.00
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10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ORLANDO-PRATT, DOLLY M
STREET ADDRESS	671 SW 29TH TERR
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	V
NAME	PRATT, FAYSSANYA G
STREET ADDRESS	671 SW 29TH TERR
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	S
NAME	PRATT, KHARTONIA G
STREET ADDRESS	671 SW 29TH TERR
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	T
NAME	PRATT, MEWZAM G
STREET ADDRESS	671 SW 29TH TERR
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: DOLLY M CLANDER-PRATT Pratt 4/10/07 954-327-8291/248-5156 cell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #