

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141936

FILED
Jan 10, 2005
Secretary of State

Entity Name: ELEGANT TOUCH DESIGN & SERVICES, INC.

Current Principal Place of Business:

2099 W. ATLANTIC BLVD #214
POMPANO BEACH, FL 33069

New Principal Place of Business:

4736 NW 6 AVE
POMPANO BEACH, FL 33064

Current Mailing Address:

2099 W. ATLANTIC BLVD #214
POMPANO BEACH, FL 33069

New Mailing Address:

4736 NW 6 AVE
POMPANO BEACH, FL 33064

FEI Number: 20-1743414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUM, MARILENE S
2099 W. ATLANTIC BLVD #214
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

BRUM, MARILENE S
4736 NW 6 AVE
POMPANO BEACH, FL 33064 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: BRUM,MARILENE,S

01/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVP () Delete
Name: BRUM, MARILENE S
Address: 1240 S. MILITARY TRAIL #1123
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S () Delete
Name: SILVA, SIRLENE R
Address: 1240 S. MILITARY TRAIL #1123
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T () Delete
Name: AVILA, ERICA C
Address: 1240 S. MILITARY TRAIL #1123
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVP (X) Change () Addition
Name: BRUM, MARILENE S
Address: 4736 NW 6 AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: S (X) Change () Addition
Name: SILVA, SIRLENE R
Address: 4736 NW 6 AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: T (X) Change () Addition
Name: AVILA, ERICA C
Address: 4736 NW 6 AVE
City-St-Zip: POMPANO BEACH, FL 33064

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: BRUM,MARILENE,S

PVP

01/10/2005

Electronic Signature of Signing Officer or Director

Date