


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P04000143846</b> 1. Entity Name ENERGY TOUCH, CORP.	
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Principal Place of Business 7745 SW 86TH ST - # D 317 MIAMI, FL 33143	Mailing Address 7745 SW 86TH ST - # D 317 MIAMI, FL 33143
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<b>DO NOT WRITE IN THIS SPACE</b>
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03032007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1773920	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  EDENBURG, SILVIA 7745 SW 86TH ST - # D 317 MIAMI, FL 33143
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EDENBURG, SILVIA 7745 SW 86TH ST - # D 317 MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SLAVIN, OSCAR ROBERTO 10229 NW 9TH STREET CIR - APT F2-202 MIAMI, FL 33172
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000732170 05/09/07-80035-013 150.00</p> <b>DO NOT WRITE IN THIS SPACE</b>
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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:  SILVIA EDENBURG  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #