

705000050970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

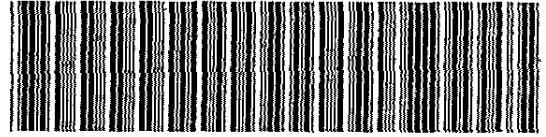
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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02/21/05--01014--008 \*\*78.75

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TALLAHASSEE, FLORIDA

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705-142775  
705-12675  
705-10278

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: YAN KI TOUCH  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: YAKUB DAVYDOV  
Name (Printed or typed)

23-22 - PIERCE ST HOLLYWOOD  
Address

HOLLYWOOD FL 33020  
City, State & Zip

(954) 881 42 11  
Daytime Telephone number

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DEPT. OF STATE  
TALLAHASSEE, FLORIDA

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NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

YAN KI TOUCH, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

2322 Pierce St Hollywood, FL 33020

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Alternative Health care

**ARTICLE IV SHARES**

The number of shares of stock is:

1000.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

YAKUB DAVYDOV - president  
Anna DAVYDOVA - Director.

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

YAKUB DAVYDOV  
2322 Pierce St Hollywood, FL 33020

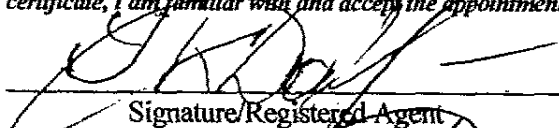
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

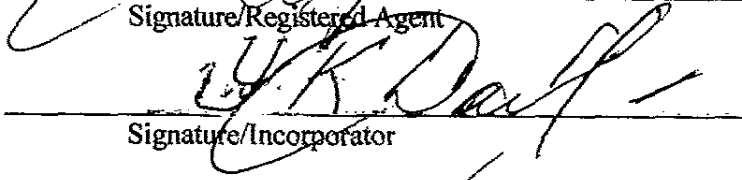
YAKUB DAVYDOV  
2322 Pierce St Hollywood, FL 33020

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Signature/Registered Agent

02.16.05  
Date

  
Signature/Incorporator

02.16.05  
Date

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STATE OF FLORIDA