2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000155532

Entity Name: TOUCHANGEL, INC. VACATION VILLAGE RESORT

FILED Sep 25, 2006 Secretary of State

Current Principal Place of Business:

FLAMINGO BLDG. 212 #106B
BONAVENTURE, FL 33326

Current Mailing Address:

New Principal Place of Business:

16461 RACQUET CLUB ROAD
SUITE 6-106B
WESTON, FL 33326

New Mailing Address:

FLAMINGO BLDG. 212 #106B
BONAVENTURE, FL 33326

FEI Number: 01-0854677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

AKHTARUZZAMAN, ABU M
16450 MIAMI DRIVE
APT. 705
NORTH MIAMI BEACH, FL 33162 US
DELOSSANTOS, MARK
16461 RACQUET CLUB ROAD
SUITE 6-106B
WESTON, FL 33326 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: MARK DELOSSANTOS 09/25/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Delete Title: () Change () Addition
Name: AKHTARUZZAMAN, ABU M
Address: 16450 MIAMI DRIVE #705
Address: Address:

Address: 16450 MIAMI DRIVE #705 Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip:

() Delete Title: Title: (X) Change () Addition Name: SANTOS, MARK D Name: DELOSSANTOS, MARK 500 NE 2ND STREET #102 500 NE 2ND STREET #102 Address: Address: DANIA BEACH, FL 33004 DANIA BEACH, FL 33004 City-St-Zip: City-St-Zip:

Title: VTD () Delete Title: () Change () Addition

 Name:
 SAKAKIBARA, SOKO
 Name:

 Address:
 500 NE 2ND STREET #102
 Address:

 City-St-Zip:
 DANIA BEACH, FL 33004
 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: MARK DELOSSANTOS PRES 09/25/2006