


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 09, 2006 8:00 am**  
**Secretary of State**

08-09-2006 90014 016 \*\*\*150.00

<b>DOCUMENT # P05000165531</b> 1. Entity Name <b>RICK'S PERSONAL TOUCH, INC.</b>					
Principal Place of Business <b>391 EAST PALMETTO AVE. LONGWOOD, FL 32750</b>			Mailing Address <b>391 EAST PALMETTO AVE. LONGWOOD, FL 32750</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>PRUSZYNSKI, RICHARD</b> <b>391 EAST PALMETTO AVE.</b> <b>LONGWOOD, FL 32750</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 <u><i>Richard Pruszyński</i></u> (NOTE: Registered Agent signature required when reappointing) DATE <u>8/7/06</u>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>PRUSZYNSKI, RICHARD</b> <b>391 EAST PALMETTO AVE.</b> <b>LONGWOOD, FL 32750</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>PRUSZYNSKI, ELIZABETH</b> <b>391 EAST PALMETTO AVE.</b> <b>LONGWOOD, FL 32750</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u><i>Richard Pruszyński</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>8/7/06</u> Daytime Phone #		



07312006 Chg-P CR2E034 (11/05)

4. FEI Number 20-3982506 Applied For ☐ Not Applicable ☐  
 5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required



ATTACHMENT  
20052117  
Division of Corporations

2006 Annual Report

Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	P05000165531
Business Entity Name	RICK'S PERSONAL TOUCH, INC.
Original File Date	12/21/2005

FEI Number

Principal Address 391 EAST PALMETTO AVE.  
LONGWOOD, FL 32750

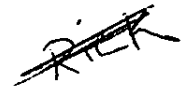
Mailing Address 391 EAST PALMETTO AVE.  
LONGWOOD, FL 32750

Registered Agent RICHARD PRUSZYNSKI  
391 EAST PALMETTO AVE.  
LONWOOD, FL 32750 US

Officer/Director Name And Address

P  
RICHARD PRUSZYNSKI  
391 EAST PALMETTO AVE.  
LONGWOOD, FL 32750

VP  
ELIZABETH PRUSZYNSKI  
391 EAST PALMETTO AVE.  
LONGWOOD, FL 32750

  
☒ After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.