

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000026044

Entity Name: MAGIC TOUCH SOLUTIONS INC

FILED  
Jun 30, 2008  
Secretary of State

## Current Principal Place of Business:

210 WINDSWEPT CR  
NEPTUNE BEACH, FL 32266

## New Principal Place of Business:

## Current Mailing Address:

210 WINDSWEPT CR  
NEPTUNE BEACH, FL 32266

## New Mailing Address:

FEI Number: 20-4352196

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEL VALLE, GLADYS  
12856 KELSEY ISLAND DR  
JACKSONVILLE, FL 32224 US

## Name and Address of New Registered Agent:

MBA GROUP PROFESSIONAL CORP  
9951 ATLANTIC BLVD  
SUITE 314  
JACKSONVILLE, FL 32225 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: GLADYS DEL VALLE

06/30/2008

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:

Title: P ( ) Delete  
Name: JOAQUIN, MARIA K  
Address: 210 WINDSWEPT CIR  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: VP ( ) Delete  
Name: RUEDA, DIEGO O  
Address: 210 WINDSWEPT CIR  
City-St-Zip: JACKSONVILLE, FL 32266

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RUEDA, MARIA K  
Address: 210 WINDSWEPT CIR  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DIEGO RUEDA

VP

06/30/2008

Electronic Signature of Signing Officer or Director

Date