

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000045876

FILED
Apr 15, 2009
Secretary of State

Entity Name: TOUCHSTAR MANAGEMENT GROUP, INC.

Current Principal Place of Business:

12441 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 772020
ORLANDO, FL 32877

New Mailing Address:

FEI Number: 20-4619158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DATTANI, KARISHMA
12441 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

DATTANI, BIREN
12441 S. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837 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: BIREN DATTANI

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DATTANI, KARISHMA
Address: 12441 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

Title: VP () Delete
Name: DATTANI, BIREN H
Address: 12441 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

Title: T () Delete
Name: PATEL, RAJAN L
Address: 12441 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

Title: S () Delete
Name: PATEL, MINA R
Address: 12441 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: PATEL, RAJAN L
Address: 12441 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

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

Title: VP () Change (X) Addition
Name: PATEL, ROMA
Address: 12441 S. ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

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: BIREN DATTANI

VP

04/15/2009

Electronic Signature of Signing Officer or Director

Date