2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000115247

Entity Name: MAGIC TOUCH EVENT PLANNERS, INC.

FILED Sep 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1809 E. BROADWAY STREET 2138 INVERNESS CT 331 OVIEDO, FL 32765

OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

 1809 E. BROADWAY STREET
 2138 INVERNESS CT

 331
 OVIEDO, FL 32765

OVIEDO, FL 32765

FEI Number: 20-5496773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TERSIGNI, MICHELLE

1809 E. BROADWAY STREET

331

CULBRETH, MARTHA
2138 INVERNESS CT
OVIEDO, FL 32765 US

OVIEDO, FL 32765 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: MARTHA CULBRETH 09/09/2009

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: P () Delete Title: P (X) Change () Addition Name: TERSIGNI, MICHELLE Name: CULBRETH, MARTHA

Address: 2612 DOUBLE TREE PLACE Address: 2138 INVERNESS COURT City-St-Zip: OVIEDO, FL 32766 City-St-Zip: OVIEDO, FL 32765

Title: VP (X) Delete Title: () Change () Addition

 Name:
 CULBRETH, MARTHA
 Name:

 Address:
 2138 INVERNESS COURT
 Address:

 City-St-Zip:
 OVIEDO, FL 32765
 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: MARTHA CULBRETH P 09/09/2009