## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000060570

Entity Name: PERFECT LASER TOUCH, INC.

11013 INDIAN OAKS DR.

TAMPA, FL 33625

Address:

City-St-Zip:

FILED Apr 14, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1155 S. DALE MABRY HWY #19 TAMPA, FL 33629 **Current Mailing Address: New Mailing Address:** 1155 S. DALE MABRY HWY TAMPA, FL 33629 FEI Number: 65-1304484 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: KOGAN, IRIS 11013 INDIAN OAKS DR. TAMPA, FL 33625 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: MGRM ( ) Delete Title: () Change () Addition MILES, ROBERT DR Name: Name: 1155 S. DALE MABRY HWY Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: SEC Title: () Change () Addition () Delete Name: KOGAN, IRIS 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: IRIS KOGAN MENA 04/14/2009