

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000101201

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** ALPHA TOUCH LTC, CORPORATION

**Current Principal Place of Business:**

12141 PEMBROKE ROAD  
PEMBROKE PINES, FL 33025

**New Principal Place of Business:**

10071 PINES BLVD  
D  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

12141 PEMBROKE ROAD  
PEMBROKE PINES, FL 33025

**New Mailing Address:**

10071 PINES BLVD  
D  
PEMBROKE PINES, FL 33024

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAYUNGBE, ALBERT A CPA  
1111 PARK CENTRE  
205  
MIAMI, FL 33027 US

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

MAYUNGBE, ALBERT A CPA  
111 NW 183 STREET  
402  
MIAMI, FL 33169 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: ALBERT A MAYUNGBE

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ONI, LARRY  
Address: 10071 NW PINES BLVD  
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby 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 all other like empowered.

SIGNATURE: LARRY ONI

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date