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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000020637 (3)

1. Corporation Name
TOUCH OF SUCCESS, INC.

Principal Place of Business

7320 SW 63RD AVE.
MIAMI FL 33143
US

Mailing Address

7320 SW 63 AVE.
MIAMI FL 33143-4817
US



3. Date Incorporated or Qualified
03/15/1993

3a. Date of Last Report
09/06/1996

2. Principal Place of Business

21 1050 STAGHORN ST

Suite, Apt. #, etc.

22 WELLINGTON, FL

City & State

23 33414 FL

Zip

24 33414 25 USA

Country

2a. Mailing Address

26 1050 STAGHORN ST

Suite, Apt. #, etc.

27 WELLINGTON, FL

City & State

28 33414 FL

Zip

29 33414 30 USA

Country

4. FEI Number
65-0511841

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fees Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

STERN, SUSAN S
7320 SW 63RD AVE.
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name

SUSAN S. STERN

82 Street Address (P.O. Box Number is Not Acceptable)

1050 STAGHORN ST

83

84 City

WELLINGTON

FL

85 Zip Code

33414

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Susan S. Stern, SUSAN S. STERN

4/15/97

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME STERN, SUSAN S
STREET ADDRESS 7320 SW 63RD AVE.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME STERN, SUSAN S.
1.3 STREET ADDRESS 1050 STAGHORN ST.
1.4 CITY-ST-ZIP WELLINGTON, FL 33414

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Susan S. Stern, PRES

4/15/97

561-753-8409

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

019882

CR2E034 (9/96)