

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000002196

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

**Entity Name:** ANTHONY'S TOUCH OF CLASS, INC.

**Current Principal Place of Business:**

18435 PAULSON DRIVE  
PORT CHARLOTTE, FL 33953

**New Principal Place of Business:**

**Current Mailing Address:**

18435 PAULSON DRIVE  
PORT CHARLOTTE, FL 33953

**New Mailing Address:**

FEI Number: 65-0459678

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERTUCCI, ANTHONY  
18435 PAULSON DRIVE  
PORT CHARLOTTE, FL 33953 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PDTS  
Name: BERTUCCI, NANCY  
Address: 18435 PAULSON DR  
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: T  
Name: BERTUCCI, ANTHONY  
Address: 18435 PAULSON DRIVE  
City-St-Zip: PORT CHARLOTTE, FL 33953

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: ANTHONY BERTUCCI

PDTS

03/18/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date