


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P94000062323</b> 1. Entity Name A TOUCH OF TRADITION, INC.						FILED 07 SEP 19 AM 10:49 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business 3585 NE 207TH STREET AVENTURA, FL 33180				Mailing Address 3585 NE 207TH STREET AVENTURA, FL 33180					
2. Principal Place of Business - No P.O. Box #				3. Mailing Address					
Suite, Apt. #, etc.				Suite, Apt. #, etc.					
City & State				City & State					
Zip		Country		Zip		Country			
4. FEI Number 65-0514341				Applied For <input type="checkbox"/> Not Applicable					
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>					
<b>6. Name and Address of Current Registered Agent</b> SOFFER, EZRA 3408 NE 210TH LANE N. MIAMI BEACH, FL 33180				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>					
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>									
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 14, 2007</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SOFFER, EZRA 3408 NE 210TH LANE N. MIAMI BEACH, FL 33180			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700109872497 09/25/07--01010--022 **150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOFFER, ALEGRIA 3408 NE 210TH LANE N. MIAMI BEACH, FL 33180			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="font-size: 2em; font-family: cursive;">[Signature]</div>			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="font-size: 2em; font-family: cursive;">[Signature]</div>			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="font-size: 2em; font-family: cursive;">[Signature]</div>			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="font-size: 2em; font-family: cursive;">[Signature]</div>			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				9/14/07 <small>Date</small>				(305) 931 0150. <small>Daytime Phone #</small>	