FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE — DIVISION OF CORPORATIONS

DOCUMENT # P94000074873 (8)

1. Corporate Name

TOUCH MARKETING, INC.

Principal Place of Business: 1919 N.E. 45TH STREET, SUITE 117, FORT LAUDERDALE FL 33308

Mailing Address: 1919 N.E. 45TH STREET, SUITE 117, FORT LAUDERDALE FL 33308

AMENDED ... FILED ... 8:10 ... SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/07/1994

3a. Date of Last Report:

2. Principal Place of Business: 21 323 W. Hemingway Circle; 22 Suite, Apt. #, etc.: ; 23 City & State: Margate, FL; 24 Zip: 33063; 25 Country: US

2a. Mailing Address: 26 323 W Hemingway Circle; 27 Suite, Apt. #, etc.: ; 28 City & State: MARGATE, FL; 29 Zip: 33063; 30 Country: US

4. FEI Number: 65-0052 6948 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee 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

TORRES, NANCY
323 WEST HEMINGWAY CIRCLE
MARGATE FL 33063

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.0502, 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: [signature] LESLIE T. STAMM 4-28-95 N/A

12. OFFICERS AND DIRECTORS

Title	PD
Name	JACKSON, FIRMAN
Street Address	1807 SHOAL RUN
City-St-Zip	SAN ANTONIO TX 78232
Title	VD
Name	STAMM, LESLIE T
Street Address	323 W. HEMINGWAY CIRCLE
City-St-Zip	MARGATE FL 33063
Title	STD
Name	TORRES, NANCY
Street Address	323 W. HEMINGWAY CIRCLE
City-St-Zip	MARGATE FL 33063

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Title / Name / Street Address / City-St-Zip — Change / Addition — left blank)

14. I hereby certify that the information supplied with this filing ... is true and accurate and that my signature shall have the same legal effect as if made under oath ...

SIGNATURE: [signature] LESLIE T. STAMM 4-28-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0214021 CP