


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 12, 2008 08:00 AM
Secretary of State

DOCUMENT # S21779 1. Entity Name MAGIC TOUCH ENTERPRISE, INC.	
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Principal Place of Business 2563 NE 15TH ST. POMPANO BEACH, FL 33062	Mailing Address P.O. BOX 11154 POMPANO BEACH, FL 33061
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DO NOT WRITE IN THIS SPACE



05082008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0240875	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KENTGUL, SEBAHITTIN 2563 NE 15TH ST. POMPANO BEACH, FL 33062	DO NOT WRITE IN THIS SPACE
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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: *Sebahittin Kentgul* SEBAHITTIN KENTGUL 5/8/2008
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT KENTGUL, SEBAHITTIN P.O. BOX 11154 POMPANO BEACH, FL 33061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS KENTGUL, CHERYL P.O. BOX 11154 POMPANO BEACH, FL 33061
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06/04/08-80011-003 150.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: *Sebahittin Kentgul* PRESIDENT 5/8/2008 954-943-5005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
SEBAHITTIN KENTGUL