

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S21779

**FILED**  
**Mar 13, 2009**  
**Secretary of State**

**Entity Name:** MAGIC TOUCH ENTERPRISE, INC.

**Current Principal Place of Business:**

2563 NE 15TH ST.  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 11154  
POMPANO BEACH, FL 33061

**New Mailing Address:**

**FEI Number:** 65-0240875      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KENTGUL, SEBAHITTIN  
2563 NE 15TH ST.  
POMPANO BEACH, FL 33062      US

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

KENTGUL, SEBAHITTIN  
2563 N.E. 15TH STREET  
POMPANO BEACH, FL 33062      US

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: SEBAHITTIN KENTGUL      03/13/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title:      DPT      ( ) Delete  
Name:      KENTGUL, SEBAHITTIN,  
Address:      P.O. BOX 11154  
City-St-Zip:      POMPANO BEACH, FL 33061

Title:      DVS      ( ) Delete  
Name:      KENTGUL, CHERYL,  
Address:      P.O. BOX 11154  
City-St-Zip:      POMPANO BEACH, FL 33061

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      DPT      (X) Change ( ) Addition  
Name:      KENTGUL, SEBAHITTIN  
Address:      P.O. BOX 11154  
City-St-Zip:      POMPANO BEACH, FL 33061

Title:      DVS      (X) Change ( ) Addition  
Name:      KENTGUL, CHERYL  
Address:      P.O. BOX 11154  
City-St-Zip:      POMPANO BEACH, FL 33061

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SEBAHITTIN KENTGUL      P      03/13/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date