

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S21779

**FILED**  
**Mar 23, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**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 N.E. 15TH STREET  
POMPANO BEACH, FL 33062 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: DPT  
Name: KENTGUL, SEBAHITTIN  
Address: P.O. BOX 11154  
City-St-Zip: POMPANO BEACH, FL 33061 US

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

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: SEBAHITTIN KENTGUL

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03/23/2011

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

\_\_\_\_\_  
Date