

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K52730

Entity Name: HEALTH TOUCH INC.

Current Principal Place of Business:

4118 BRENTWOOD PARK CR
TAMPA, FL 33624

Current Mailing Address:

PO BOX 273233
TAMPA, FL 33688-3233 US

FEI Number: 59-2921940

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRESTI, STEPHANIE
4118 BRENTWOOD PARK CIRCLE
TAMPA, FL 33624 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name PRESTI, STEPHANIE L
Address 4118 BRENTWOOD PL CIR
City-State-Zip: TAMPA FL 33624

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: STEPHANIE PRESTI

OFFICER

01/26/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date