2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005128

Entity Name: ELEGANT ILLUSIONS INC

FILED Jul 11, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	HOUSE AVE., ROVE, CA 93				
Current Mailing Address:			New Mailing Addres	ss:	
	HOUSE AVE., ROVE, CA 93				
FEI Number:	77-0192727	FEI Number Applied For () FEI	Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
1200 SOU PLANTATI	ORATION SYS TH PINE ISLAN ON, FL 33324 named entity s	ND ROAD US	se of changing its registere	ed office or registered agent, or both,	
	of Florida.		3 3 3		
SIGNATUF	RE:				
	Electron	ic Signature of Registered Agent		Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GEAR, GAVIN	Delete CULAR BID LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () CARDINAL, JAN 2001 OCEAN S' SANTA CRUZ, C	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GEAR, TAMARA	CULAR BID LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () HEINZE, JANET 542 LIGHTHOU: PACIFIC GROV	SE AVE., STE 5	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GAVIN GEAR PD 07/11/2007