2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# L04000015993

Entity Name: AQUALLUSION EVENT RENTALS, LLC

Current Principal Place of Business:

418 TERIWOOD AVE
ORLANDO, FL 32812

New Principal Place of Business:

1832 S. DIVISION AVE
ORLANDO, FL 32805

Current Mailing Address:

4118 TERIWOOD AVENUE
ORLANDO, FL 32812

New Mailing Address:

1832 S. DIVISION AVE
ORLANDO, FL 32805

FEI Number: 43-2046646 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCKNIGHT, DAVE C
4118 TERIWOOD AVENUE
ORLANDO, FL 32812 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MCKNIGHT, DAVE C.
Address: 4118 TERIWOOD AVENUE
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID MCKNIGHT MGRM 01/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date