2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001502

Entity Name: CHEER ILLUZIONS, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15640 WEST BUNCHE PARK DRIVE OPA LOCKA, FL 33054

Current Mailing Address: New Mailing Address:

15640 WEST BUNCHE PARK DRIVE OPA LOCKA, FL 33054

FEI Number: 20-2537269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ZALKA, STEPHEN M

TANISHA, JOHNBAPTISTE

6437 NW 99TH AVE

15640 WEST BUNCHE PARK DRIVE

PARKLAND, FL 33076 US MIAMI, FL 33054 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: TANISHA JOHNBAPTISTE 04/30/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 JOHNBAPTISTE, TANISHA D
 Name:
 JOHNBAPTISTE, TANISHA D

 Address:
 15540 W BUNCHE PK DR
 Address:
 15640 WEST BUNCHE PK DR

 City-St-Zip:
 OPA LOCKA, FL 33054
 City-St-Zip:
 OPA LOCKA, FL 33054

 Title:
 V
 () Delete
 Title:
 V
 (X) Change () Addition

 Name:
 MARSH, CASSANDRA
 Name:
 STRAUGHTER, LEKETRISSE

 Address:
 3217 DOLPHIN DR
 Address:
 514 NW 179 ST

Address: 3217 DOLPHIN DR Address: 514 NW 179 ST City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIAMI, FL 33169

Title: S () Delete Title: S (X) Change () Addition Name: STRAUGHTER, LEKETRISSE Name: MARTIN, OCTAVIA

Address: 514 NW 179 ST Address: 8410 NORTH SHERMAN CIRCLE

City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIRAMAR, FL 33025

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TANISHA JOHNBAPTISTE P 04/30/2007