## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000086831

Entity Name: ELILOU ENTERPRISES, INC

FILED May 01, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4140 TWILIGHT TRAILS KISSIMMEE, FL 34746					
Current Mailing Address:			New Mailing Address:		
4140 TWILIGHT TRAILS KISSIMMEE, FL 34746					
FEI Number:	90-0138187	FEI Number Applied For ( ) FEI Nur	nber Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MARRERO, LOURDES 4140 TWILIGHT TRAILS KISSIMMEE, FL 34746 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					
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/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	PRES () D MARRERO, ELIU 4140 TWILIGHT T KISSIMMEE,, FL	PRES RAILS	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () D MARRERO, LOUF 4140 TWILIGHT T KISSIMMEE,, FL	RDES SEC FRAILS	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition MARRERO, LOURDES VP 4140 TWILIGHT TRAILS KISSIMMEE,, FL 34746 US	
Title: Name: Address: City-St-Zip:	( ) D	elete	Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition MARRERO, LIZA L SEC 4140 TWILIGHT TRAILS KISSIMMEE, FL 34746 US	
Title: Name: Address: City-St-Zip:	( ) D	elete	Title: Name: Address: City-St-Zip:	TRES () Change (X) Addition MARRERO, ELIU TRES PO BOX 608230 ORLANDO,, FL 32860 US	
Title: Name: Address: City-St-Zip:	( ) D	elete	Title: Name: Address: City-St-Zip:	OFF () Change (X) Addition MARRERO, VANESSA OFF 4140 TWILIGHT TRAILS KISSIMMEE,, FL 34746 US	
Title: Name: Address: City-St-Zip:	( ) D	elete	Title: Name: Address: City-St-Zip:	OFF () Change (X) Addition MARRERO, OMAR OFF 10008 EASTERN LAKE AVE ORLANDO,, FL 32817 US	
I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LIZA L. MARRERO SEC 05/01/2005