

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086831

Entity Name: ELILOU ENTERPRISES, INC

FILED
May 30, 2007
Secretary of State

Current Principal Place of Business:

4140 TWILIGHT TRAILS
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

4140 TWILIGHT TRAILS
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 90-0138187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRERO, LOURDES
4140 TWILIGHT TRAILS
KISSIMMEE, FL 34746 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

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:

Title: PRES () Delete
Name: MARRERO, ELIU PRES
Address: 4140 TWILIGHT TRAILS
City-St-Zip: KISSIMMEE,, FL 34746 US

Title: VP () Delete
Name: MARRERO, LOURDES VP
Address: 4140 TWILIGHT TRAILS
City-St-Zip: KISSIMMEE,, FL 34746 US

Title: SEC () Delete
Name: PETTET, LIZA L SEC
Address: 919 CUMBRAN LN
City-St-Zip: KISSIMMEE, FL 34758 US

Title: TRES () Delete
Name: MARRERO, ELIU TRES
Address: 1344 BURNLEY CT
City-St-Zip: KISSIMMEE, FL 34758 US

Title: OFF () Delete
Name: MARRERO, VANESSA OFF
Address: 4140 TWILIGHT TRAILS
City-St-Zip: KISSIMMEE,, FL 34746 US

Title: OFF () Delete
Name: MARRERO, OMAR OFF
Address: 4140 TWILIGHT TRAILS
City-St-Zip: KISSIMMEE, FL 34746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change () Addition
Name: PETTET, LIZA L SEC
Address: 624 KANGAROO DR
City-St-Zip: KISSIMMEE, FL 34759 US

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

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

Title: OFF (X) Change () Addition
Name: MARRERO, OMAR OFF
Address: 129 E. AMELIA ST. #105
City-St-Zip: ORLANDO, FL 32801 US

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: LOURDES MARRERO

VP

05/30/2007

Electronic Signature of Signing Officer or Director

Date