P04000130866

(Requestor's Name)
(Address)
, ,
(Address)
(City/Chata/Zia/Dhaya 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
, and seems
Special Instructions to Filing Officer:
i

Office Use Only



400213484674

400213484674 10/25/11--01010--026 **135.00

MIRA Perego



M 12-27-11

COVER LETTER

SUBJECT: ILLUSIONS, INC.		
(Name of Corporation)		
DOCUMENT NUMBER: P04000130866		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing		
Please return all correspondence concerning this matter to the following:		
James M. Wallace		
(Name of Person)		
Law Office of James M. Wallace		
(Name of Firm/Company)		
420 Old Main Street		
(Address)		
Bradenton, FL 34205		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Diane L. Haggard, Secretary at (941) 746-7157 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 made payable to the Florida Department of State.		
Street Address:Mailing Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsClifton BuildingPost Office Box 63272661 Executive Center CircleTallahassee, FL 32301		

•

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, WALTER L. PRESHA, SR.	, hereby resign as President and Director (Title)
of ILLUSIONS, INC.	f Corporation)
P04000130866 (Document Number, if known) Florida	, a corporation organized under the laws of the State of
——————————————————————————————————————	gnature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314