2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000071927

Address:

City-St-Zip:

653 MONUMENT ROAD #1417

JACKSONVILLE, FL 32225

Entity Name: ELITE IMAGES ENTERTAINMENT GROUP, INC.

FILED Sep 15, 2009 Secretary of State

Current Principal Place of Business: 653 MONUMENT ROAD #1417 JACKSONVILLE, FL 32225 Current Mailing Address:			New Principal Place of Business: 653 MONUMENT ROAD 1417 JACKSONVILLE, FL 32225 New Mailing Address:						
					653 MONUMENT ROAD #1417 JACKSONVILLE, FL 32225			653 MONUMENT ROAD 1417 JACKSONVILLE, FL 32225	
					FEI Number	: 80-0229946	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:						
JACKSON The above	LÍS ROAD IVILLE, FL 322		purpose of changing its registere	ed office or registered agent, or bo					
SIGNATU		nic Signature of Registered Ag	ent	 Date					
	nce with s. 607.19	3(2)(b), F.S., the corporation did ng Trust Fund Contribution ().		Suit					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECT						
Title: Name: Address: City-St-Zip:	HOUSTON, RIC	NT ROAD #1417	Title: Name: Address: City-St-Zip:	() Change () Addition					
Title: Name: Address: City-St-Zip:	HOUSTON, CA	NT ROAD #1417	Title: Name: Address: City-St-Zip:	() Change () Addition					
Title: Name: Address: City-St-Zip:	EASON, JOHN) Delete NT ROAD #1417 E, FL 32225	Title: Name: Address: City-St-Zip:	() Change () Addition					
Title: Name: Address: City-St-Zip:	RILEY, ALVER	NT ROAD #1417	Title: Name: Address: City-St-Zip:	() Change () Addition					
Title:	Т () Delete	Title:	() Change () Addition					

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.

Address:

City-St-Zip:

SIGNATURE: RICHARD HOUSTON DP 09/15/2009