FOR PROFIT CORPORATION

U	NIFORM BUSINE	SS REPORT	' (UBI	R)	e	•	122	
DOCUMENT # P97000081474 1. Entity Name					, .	FILED	, 0	
ILLUSIONS BY RAQUEL, INC.								
					02 SEP -4 AM 9: 53			
DO NOT WRITE IN THIS SPACE					SECRETARY OF STATE TALLAHASSEE, FLORIDA 400077341242			
•	Place of Business	3. Mailing Address				-09/13/02	01047016 00 ****300.00	
Suite, Apt.		19101 MYSTIC POINT DRIVE Suite, Apt. #, etc. 2506				DO NOT WRITE IN 1		
City & Stat		City & State			4. FEI Number Applied For			
Zip	VENTURA, FL Country	AVENTURA, FL			65-0782742		Not Applicable	
33	3180 USA	33180	Country USA		5. Certificate of	\$8.75 Additional Fee Required		
				lame	7. Name and Address of Current Registered Agent			
DO NOT WRITE			S	ROCHELL GREEN Street Address (P.O. Box Number is Not Acceptable)				
IN THIS SPACE				19101 MYSTIC POINT DRIVE, STE. 2506				
				Dity			Zip Code	
AVENTURA 33180								
8. 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 ROCHELL GREEN Signature, typed or printed hame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
0 This same		January 1 - M			when reinstating)		DATE	
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so.	After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of Stat			Trust	ion Campaign Financing Fund Contribution.	\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS								
TITLE NAME	P ROCHELL GREEN		TIFLE NAME			e.		
STREET ADDRESS	19101 MYSTIC POINT DRIVI	E, STE. 2506	STREET AD					
CITY-ST-ZIP	AVENTURA, FL 33180		CITY-ST-7	ZiP				
TITLE NAME	VP AVI AVNI							
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·			DDRESS				
CITY-ST-ZIP	AVENTURA, FL 33180	· · · · · · · · · · · · · · · · · · ·	CITY-ST-Z	219				
NAME			- NAME		المن من معامل	Service of the servi	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS CITY-ST-ZIP			STREET AD	I	DO NOT WRITE			
TITLE					IN THIS SPACE			
NAME	NDECC		name Street ad	nnpree	IN THIS SPACE			
STREET ADDRESS CITY-ST-ZIP				ZIP				
TITLE			TITLE				4	
NAME STREET ADDRESS			NAME STREET AD	DRESS				
CITY-ST-ZIP			CITY-ST-2	ţ				
TITLE			TITLE		· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS			NAME STREET AD	DRESS				

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or on an attachment with an address with all other like empowered.

CITY-ST-ZIP

SIGNATURE/Cx

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-935-3504 Daytime Phone #

Illusions by Raquel, Inc. 19101 Mystic Point Drive, Ste. 2506 Aventura, FL 33180

8-29-02

Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: P97000081474

To Whom It May Concern:

Please be advised that the address of my corporation has changed and I never received my 2001 UBR.

I have enclosed a blank report that I have filled out, along with the filing fees for 2001 and 2002. Please reinstate my corporation and update my information.

Thank you,

Rochell Green

President