

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051850

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: PLANA USA LLC

## Current Principal Place of Business:

C/O STATE CAPITAL USA  
777 BRICKELL AVENUE STE 1150  
MIAMI, FL 33131 US

## New Principal Place of Business:

C/O STATE CAPITAL  
777 BRICKELL AVE SUITE 1150  
MIAMI, FL 33131 US

## Current Mailing Address:

C/O STATE CAPITAL USA  
777 BRICKELL AVENUE STE 1150  
MIAMI, FL 33131 US

## New Mailing Address:

C/O STATE CAPITAL  
777 BRICKELL AVENUE STE 1150  
MIAMI, FL 33131 US

FEI Number: 26-0203733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA CORPORATE REGISTERED AGENTS LLC  
7200 NW 19 ST  
MIAMI, FL 33126 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

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MACCARINI, VALENTINO  
Address: 777 BRICKELL AVENUE STE 1150  
City-St-Zip: MIAMI, FL 33131 US

Title: MGR ( ) Delete  
Name: TORRIGLIA, MAURIZIO  
Address: VIA EMILIA N.9  
City-St-Zip: TORTONA, ITALY, AL 15057 IT

Title: MGR ( ) Delete  
Name: SEMINO, MARIA CARLA  
Address: VIA EMILIA N.9  
City-St-Zip: TORTONA, ITALY, AL 15057 IT

Title: MGR ( ) Delete  
Name: BORDONI, ANDREA  
Address: V. LORENZO PEROSI N. 50  
City-St-Zip: TORTONA, ITALY, AL 15057 IT

Title: MGR ( ) Delete  
Name: BORDONI, MAURO  
Address: V. ALDO MORO N.72/B  
City-St-Zip: TORTONA, ITALY, AL 15057 IT

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MACCARINI, VALENTINO  
Address: 777 BRICKELL AVE SUITE 1150  
City-St-Zip: MIAMI, FL 33131 US

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

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

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

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VALENTINO MACCARINI

MGR

04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date