

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K21164

FILED  
Jan 29, 2010  
Secretary of State

**Entity Name:** LILLIAN ENTERPRISES, INC.

**Current Principal Place of Business:**

C/O SANDLER, WILLIAM  
3100 SOUTH OCEAN BOULEVARD, APT. 402N  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SANDLER, WILLIAM  
3100 SOUTH OCEAN BOULEVARD, APT. 402N  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 04-2445912      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEVINE, JOEL H  
505 S FLAGLER DR, STE 900  
WEST PALM BEACH, FL 33401      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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPT  
**Name:** SANDLER, WILLIAM B.  
**Address:** 3100 S OCEAN BLVD  
**City-St-Zip:** PALM BEACH, FL

**Title:** DVS  
**Name:** SANDLER, LILLIAN  
**Address:** 3100 S OCEAN BLVD  
**City-St-Zip:** PALM BEACH, FL

**Title:** D  
**Name:** SANDLER, JAMES E.  
**Address:** 3100 S OCEAN BLVD  
**City-St-Zip:** PALM BEACH, FL

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM B. SANDLER

PRES

01/29/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date