

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060657

**FILED**  
**Apr 13, 2009**  
**Secretary of State**

**Entity Name:** LILLIANA INVESTMENTS, LLC

**Current Principal Place of Business:**

57 CENTRAL AVE.  
MEDFORD, MA 02155

**New Principal Place of Business:**

59 SWAN STREET  
MALDEN, MA 02148

**Current Mailing Address:**

57 CENTRAL AVE.  
MEDFORD, MA 02155

**New Mailing Address:**

59 SWAN STREET  
MALDEN, MA 02148

**FEI Number:** 26-0279220

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COWLES, CARLA  
2023 N. ATLANTIC AVE., SUITE 279  
COCOA BEACH, FL 32931 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: MGRM ( ) Delete  
Name: CACCIATORE, JOHN M  
Address: 59 SWAN STREET  
City-St-Zip: MALDEN, MA 02148

**ADDITIONS/CHANGES:**

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:** JOHN M. CACCIATORE

MGRM

04/13/2009

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