

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT (AR)**

DOCUMENT # P04000032584

1. Entity Name

LILY DOLL, INC



**FILED  
Apr 18, 2005 8:00 am  
Secretary of State**

03-31-2005 90036 009 \*\*\*150.00

Principal Place of Business  
741 N 69TH TERRACE  
HOLLYWOOD FL 33024

Mailing Address  
741 N 69TH TERRACE  
HOLLYWOOD FL 33024

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

4. FEI Number

20-07472 16

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CANNATARO, LILIAN  
741 N 69TH TERRACE  
HOLLYWOOD FL 33024

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing - \$5.00 May Be  
Trust Fund Contribution.  Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  Delete  
NAME CANNATARO, LILIAN  
STREET ADDRESS 741 N 69TH TERRACE  
CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP  Delete  
NAME CANNATARO, JOHN  
STREET ADDRESS 741 N 69TH TERRACE  
CITY-ST-ZIP HOLLYWOOD FL 33024

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lillian Cannataro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LILLIAN CANNATARO

3-27-05

954-987-3248

Date

Daytime Phone #