2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038005

Entity Name: LLORIAN INVESTMENTS, INC.

FILED Jan 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6450 W 21 CT. 1025 CASTILE AVENUE SUITE 206 CORAL GABLES, FL 33134 HIALEAH, FL 33016

Current Mailing Address: New Mailing Address:

6450 W 21 CT. 1025 CASTILE AVENUE SUITE 206 CORAL GABLES, FL 33134 HIALEAH, FL 33016

FEI Number: 65-0914253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MARTINEZ, MANUEL
6450 W 21 CT.
SUITE 206
HIALEAH, FL 33016 US

MARTINEZ, MANUEL
1025 CASTILE AVENUE
CORAL GABLES, FL 33134 US

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: MANUEL MARTINEZ 01/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete

 Name:
 MARTINEZ, MANUEL

 Address:
 6450 W 21 CT. SUITE # 206

 City-St-Zip:
 HIALEAH, FL 33016

Title: S () Delete
Name: MARTINEZ, MANUEL
Address: 6450 W 21 CT. SUITE # 206
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARTINEZ, MANUEL
Address: 1025 CASTILE AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: S (X) Change () Addition

Name: MARTINEZ, MANUEL
Address: 1025 CASTILE AVENUE
City-St-Zip: CORAL GABLES, FL 33134

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 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 an address, with all other like empowered.

SIGNATURE: MANUEL MARTINEZ P 01/23/2009