

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000075273

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Entity Name:** LISUSS, INC.

**Current Principal Place of Business:**

7147 OLD KINGS ROAD, SOUTH  
109  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

2526 TWIN SPRINGS DRIVE SOUTH  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

7147 OLD KINGS ROAD, SOUTH  
109  
JACKSONVILLE, FL 32217

**New Mailing Address:**

2526 TWIN SPRINGS DRIVE SOUTH  
JACKSONVILLE, FL 32246

**FEI Number:** 42-1574757

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARRARD, JAY  
6828 ST AUGUSTINE RD  
JACKSONVILLE, FL 32217 US

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

GARRARD, JAY CPA  
6828 ST AUGUSTINE RD  
JACKSONVILLE, FL 32217 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: JAY GARRARD, CPA

04/26/2006

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHTJEFNI, LODOVIK  
Address: 7147 OLD KINGS ROAD, SOUTH 109  
City-St-Zip: JACKSONVILLE, FL 32217

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SHTJEFNI, LODOVIK  
Address: 2526 TWIN SPRINGS DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the 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: LODOVIK SHTJEJNI

D

04/26/2006

Electronic Signature of Signing Officer or Director

Date