

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000044363

Entity Name: LISA KONING, INC.

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1668 STARGAZER TERRACE  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

1668 STARGAZER TERRACE  
SANFORD, FL 32771 US

**New Mailing Address:**

FEI Number: 20-0837538

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWART BAUMRUK & COMPANY, LLP  
1101 MIRANDA LANE  
KISSIMMEE, FL 34741 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

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: SCHARF, LISA  
Address: 1668 STARGAZER TERRACE  
City-St-Zip: SANFORD, FL 32771 US

Title: VPD  
Name: SCHARF, MICHAEL  
Address: 1668 STARGAZER TERRACE  
City-St-Zip: SANFORD, FL 32771 US

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: LISA S. SCHARF

PRES

01/12/2012

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

\_\_\_\_\_  
Date