

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000055724

FILED  
Apr 12, 2012  
Secretary of State

Entity Name: JONARO, INC.

## Current Principal Place of Business:

905 NW 20TH AVENUE  
CAPE CORAL, FL 33993 US

## New Principal Place of Business:

## Current Mailing Address:

905 NW 20TH AVENUE  
CAPE CORAL, FL 33993 US

## New Mailing Address:

FEI Number: 27-4698797      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WESTENDORF, CAREN  
905 NW 20TH AVENUE  
CAPE CORAL, FL 33993 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: PRES  
Name: WESTENDORF, CAREN  
Address: 905 NW 20TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33993

Title: SEC  
Name: WESTENDORF, CAREN  
Address: 905 NW 20TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33993

Title: TREA  
Name: WESTENDORF, CAREN  
Address: 905 NW 20TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33993

Title: DIR  
Name: WESTENDORF, CAREN  
Address: 905 NW 20TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33993

Title: VP  
Name: WESTENDORF, SCOT  
Address: 905 NW 20TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33993

Title: DIR  
Name: WESTENDORF, SCOT  
Address: 905 NW 20TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33993

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: CAREN WESTENDORF

PRES

04/12/2012

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

\_\_\_\_\_  
Date