

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000007333

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** LIFESTYLE SOLUTIONS NETWORK, INC.

**Current Principal Place of Business:**

9378 NW 49TH PLACE  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

9378 NW 49TH PLACE  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:** 27-4676716

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SPERDUTO, GUY D  
8963 STIRLING RD  
COOPER CITY, FL 33328 US

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

LORING, PHILIP KEN  
9378 N.W. 49TH PLACE  
SUNRISE, FL 33351 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: PHILIP KEN LORING

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LORING, PHILIP KENNETH  
Address: 9378 NW 49TH PLACE  
City-St-Zip: SUNRISE, FL 33351 US

Title: VPSD  
Name: LORING, LISA A  
Address: 9378 N.W. 49TH PLACE  
City-St-Zip: SUNRISE, FL 33351 US

Title: TD  
Name: SPERDUTO, GUY  
Address: 8963 STIRLING ROAD SUITE 101  
City-St-Zip: COOPER CITY, FL 33328 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: PHILIP KEN LORING

PD

04/30/2012

Electronic Signature of Signing Officer or Director

Date