2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162971

Entity Name: CONNECTRONICS CORP.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3000 TAFT ST. HOLLYWOOD, FL 33021 **Current Mailing Address: New Mailing Address:** 3000 TAFT ST HOLLYWOOD, FL 33021 FEI Number: 20-1971140 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: MENDELSON, VICTOR H ESQ. 825 BRICKELL BAY DR., STE. 1644 MIAMI, FL 33131 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition IRWIN, THOMAS S IRWIN, THOMAS S Name: Name: 3000 TAFT ST. 3000 TAFT ST. Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33021 Title: Title: () Delete () Change () Addition Name: RICKETTS, THOMAS L Name: 2745 AVONDALE AVE Address: Address: TOLEDO, OH 43607 City-St-Zip: City-St-Zip:) Delete Title: Title: () Change () Addition MOCEK, AL Name: Name: 2745 AVONDALE AVE Address: Address: City-St-Zip: TOLEDO, OH 43607 City-St-Zip: Title: () Delete Title: (X) Change () Addition VETTER, JUDITH W VETTER, JUDITH W Name: Name: Address: 3000 TAFT ST Address: 825 BRICKELL BAY DRIVE #1643 City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: MIAMI, FL 33131 Title: Title: () Delete () Change () Addition LETENDRE, ELIZABETH Name: Name: 3000 TAFT ST Address: Address: HOLLYWOOD, FL 33021 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition MENDELSON, VICTOR H Name: Name: 3000 TAFT ST Address: Address: City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33021

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: THOMAS S. IRWIN T 04/17/2009