2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 388362

Entity Name: NEUROTRONICS, INC.

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

912 NE 2ND STREET

US GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

912 NE 2ND STREET

GAINESVILLE, FL 32601 US

FEI Number: 59-1410850 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:

LAURYN, DAWN M SMITH, JACK R 20825 NE 132 AVENUE 912 NE 2ND STREET

WALDO, FL 32694 GAINESVILLE, FL 32601 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: DAWN M. LAURYN 02/02/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CSD () Delete Title: DPTS (X) Change () Addition

KAMIIDE, KIICHIRO Name: SMITH, DARI Name: 700 S.W. 16TH PLACE 90 ICON STREET Address: Address:

City-St-Zip: GAINESVILLE, FL City-St-Zip: FOOTHILL RANCH, CA 92610

PD Title: Title: () Delete (X) Change () Addition

HARASAWA, EISHI Name: SMITH JACK Name: 20825 NE 132 AVENUE 90 ICON STREET Address: Address:

City-St-Zip: WALDO, FL 32697 City-St-Zip: FOOTHILL RANCH, CA 92610

Title: Title: VD () Delete (X) Change () Addition MCCARTHY-SMITH, EILEEN KAMIHIRATA, TOSHIFUMI Name: Name:

20825 NE 132 AVENUE 90 ICON STREET Address: Address:

City-St-Zip: WALDO, FL 32697 City-St-Zip: FOOTHILL RANCH, CA 92610

Title: () Delete Title: (X) Change () Addition SHANAHAN, STACI YANAGIHARA, KAZUTERU Name: Name:

Address: 9234 BAY DRIVE Address: 90 ICON STREET City-St-Zip: SURFSIDE, FL 33154 City-St-Zip: FOOTHILL RANCH, CA 92610

Title: Title: (X) Change () Addition AS () Delete VMGR

LAURYN, DAWN M Name: JOHNSON, JAKE B Name: 6829 SE 14TH LANE Address: 912 NE 2ND STREET Address: City-St-Zip: GAINESVILLE, FL 32641 City-St-Zip: GAINESVILLE, FL 32601

Title: () Delete Title: MGR () Change (X) Addition

LAURYN, DAWN M Name: Name: Address: Address: 912 NE 2ND STREET City-St-Zip: City-St-Zip: GAINESVILLE, FL 32601

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: DAWN M. LAURYN MGR 02/02/2009