


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # F16559 1. Entity Name NIETRONICS INCORPORATED	
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Principal Place of Business 958 GREENWOOD RD WESTON, FL 33327 US	Mailing Address 958 GREENWOOD DRIVE WESTON, FL 33327 US
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01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2128328	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GERMAN, NIETO
958 GREENWOOD RD
WESTON, FL 33327

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

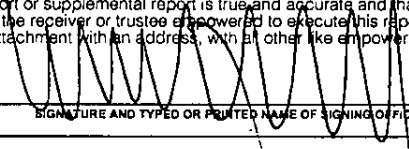
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD NIETO, GERMAN 958 GREENWOOD RD WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD NIETO, FABIO CARRERA 11 NO 98-35 BOGOTA, CO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/14/08-80008-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:  **01-08-08** **954 680-1416**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #