

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H89354

Entity Name: NEURONET INC.

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

627 NE 17 AVE.  
FT. LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

627 NE 17 AVE.  
FT. LAUDERDALE, FL 33304

**New Mailing Address:**

FEI Number: 59-2627984

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROWE, NANCY WAEGEL  
627 NE 17TH AVENUE  
FT. LAUDERDALE, FL 33304 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: PD  
Name: ROWE, NANCY  
Address: 627 NE 17 AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33304 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: NANCY WAEGEL ROWE

PRES

01/13/2012

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

\_\_\_\_\_  
Date