2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M64343

Entity Name: MENTALROBICS, INC.

FILED Jan 14, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

11835 CANON BLVD. 11835 CANON BLVD.

SUITE C-105 SUITE C105

NEWPORT NEWS, VA 236062570 NEWPORT NEWS, VA 236062570 US

Current Mailing Address: New Mailing Address:

C/O RICHARD FLINT 11835 CANON BLVD.

P.O. BOX 213545 SUITE C105

WEST PALM BEACH, FL 334213545 NEWPORT NEWS, VA 236062570 US

FEI Number: 65-0020387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

FLINT, RICHARD FLINT, RICHARD L
2524 GLENDALE PLACE 2524 GLENDALE PLACE

ROYAL PALM BEACH, FL 33411 US ROYAL PALM BEACH, FL 33411 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: RICHARD L. FLINT 01/14/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 FLINT, RICHARD
 Name:
 FLINT, RICHARD L

 Address:
 2524 GLENDALE PLACE
 Address:
 2524 GLENDALE PLACE

City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: ROYAL PALM BEACH, FL 33411 US

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

Name: FLINT, KAREN Name: FLINT, KAREN A

 Address:
 105 CARNOUSITE COURT
 Address:
 105 CARNOUSITE COURT

 City-St-Zip:
 YORKTOWN, VA 23693
 City-St-Zip:
 YORKTOWN, VA 23693 US

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

 Name:
 SMITH, BARBARA DENISE
 Name:

 Address:
 621 HAMILTON DRIVE
 Address:

 City-St-Zip:
 NEWPORT NEWS, VA 23602
 City-St-Zip:

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: KAREN A. FLINT P 01/14/2009