

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117622

Entity Name: HANDS & BRAIN, INC.

FILED  
Jan 30, 2009  
Secretary of State

## Current Principal Place of Business:

5401 S KIRKMAN RD  
SUITE 310  
ORLANDO, FL 32819

## New Principal Place of Business:

424 E CENTRAL BLVD  
SUITE 147  
ORLANDO, FL 32801

## Current Mailing Address:

5401 S KIRKMAN RD  
SUITE 310  
ORLANDO, FL 32819

## New Mailing Address:

424 E CENTRAL BLVD  
SUITE 147  
ORLANDO, FL 32801

FEI Number: 80-0025677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RODEGRA, HEINZ A MBA  
424 E CENTRAL BLVD  
SUITE 147  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

RODEGRA, HEINZ A MBA  
13506 SUMMERPORT VILLAGE PKWY  
SUITE 105  
WINDERMERE, FL 34786 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: RODEGRA

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RODEGRA, KARIN DR.  
Address: 424 E CENTRAL BLVD  
City-St-Zip: ORLANDO, FL 32801

Title: VPD (X) Delete  
Name: RODEGRA, HEINZ A MBA  
Address: 424 E CENTRAL BLVD  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RODEGRA, HEINZ A MBA  
Address: 13506 SUMMERPORT VILLAGE PKWY  
City-St-Zip: WINDERMERE, FL 34786

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: RODEGRA

PD

01/30/2009

Electronic Signature of Signing Officer or Director

Date