2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000044180

Entity Name: NOLTERPHARMA CORP.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

12230 FOREST HILL BLVD SUITE 118 SUITE 110
WELLINGTON, FL 33414 12230 FOREST HILL BLVD SUITE 110
WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

12230 FOREST HILL BLVD SUITE 118 SUITE 110
WELLINGTON, FL 33414 WELLINGTON, FL 33414

FEI Number: 98-0394173 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:

STEWART, ROBERT W PA
1395 BRICKELL AVENUE
SUITE 650
MIAMI, FL 33131 US
STEWART, ROBERT W PA
18001 OLD CUTLER ROAD
SUITE 600
MIAMI, FL 33157 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: 04/13/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PSD (X) Change () Addition Name: RODRIGUEZ, JULIO Name: PEREZ, CESAR

 Address:
 151 CRANDON BLVD #445
 Address:
 2509 RESEARCH BLVD.

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 City-St-Zip:
 FORT COLLINS, CO 80526

Title: D (X) Delete Title: () Change () Addition Name: RODRIGUEZ, GASTON Name:

Address: 151 CRANDON BLVD #445 Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip:

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

 Name:
 RODRIGUEZ, PATRICIO M
 Name:

 Address:
 151 CRANDON BLVD #445
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 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: CESAR PEREZ D 04/13/2009