2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000064271

Entity Name: NEXUSBIOMETRICS, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5824 BEE RIDGE RD 6321 PORTER ROAD

#288 SUITE 8

SARASOTA, FL 34233 US SARASOTA, FL 34240 US

Current Mailing Address: New Mailing Address:

8742 MISTY CREEK DRIVE 6321 PORTER ROAD

SARASOTA, FL 34241 US SUITE 8

SARASOTA, FL 34240 US

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

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

RAUCH, MARTIN W JR
5824 BEE RIDGE RD
4288

RAUCH, MARTIN W JR
6321 PORTER ROAD
SUITE 8

SARASOTA, FL 34233 US SARASOTA, FL 34240 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: MARTIN W. RAUCH 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: (X) Change () Addition RAUCH, MARTIN W JR Name: Name: RAUCH, MARTIN W JR 5824 BEE RIDGE RD #288 6321 PORTER ROAD, SUITE 8 Address: Address: City-St-Zip: SARASOTA, FL 34233 US City-St-Zip: SARASOTA, FL 34240 US

Title: VTD () Delete Title: VTD (X) Change () Addition Name: BAKER, BRADFORD Name: BAKER, BRADFORD

Address: 5824 BEE RIDGE RD #288 Address: 6321 PORTER ROAD, SUITE 8
City-St-Zip: SARASOTA, FL 34233 US City-St-Zip: SARASOTA, FL 34240 US

Title: VPD () Delete Title: VPD (X) Change () Addition Name: HUSAIN, SAMIR Name: HUSAIN, SAMIR

 Address:
 5824 BEE RIDGE RD
 Address:
 6321 PORTER ROAD, SUITE 8

 City-St-Zip:
 SARASOTA, FL 34233 US
 City-St-Zip:
 SARASOTA, FL 34240 US

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: MARTIN W. RAUCH PRES 04/30/2009