

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 388362

**Entity Name:** NEUROTRONICS, INC.**Current Principal Place of Business:**3600 NW 43RD STREET  
SUITE F1  
GAINESVILLE, FL 32606**Current Mailing Address:**3600 NW 43RD STREET  
SUITE F1  
GAINESVILLE, FL 32606 US**FEI Number:** 59-1410850**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, JAKE  
3600 NW 43RD ST.  
SUITE F1  
GAINESVILLE, FL 32606 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:** JAKE JOHNSON

04/14/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DPTS  
Name MASE, RYUZO  
Address 3600 NW 43RD STREET  
SUITE F1  
City-State-Zip: GAINESVILLE FL 32606

Title D  
Name AIDA, HIROSHI  
Address 3600 NW 43RD STREET  
SUITE F1  
City-State-Zip: GAINESVILLE FL 32606

Title D  
Name MAGARA, MAKOTO  
Address 3600 NW 43RD STREET  
SUITE F1  
City-State-Zip: GAINESVILLE FL 32606

Title V  
Name JOHNSON, JAKE B  
Address 3600 NW 43RD STREET  
SUITE F1  
City-State-Zip: GAINESVILLE FL 32606

Title V  
Name SCHUBERT, JAMES W  
Address 3600 NW 43RD STREET  
SUITE F1  
City-State-Zip: GAINESVILLE FL 32606

*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:** JAKE B. JOHNSON

VP OF OPERATIONS

04/14/2016

Electronic Signature of Signing Officer/Director Detail

Date