2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31832

Address:

City-St-Zip:

Entity Name: HAMILTON MEDICAL, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 30008 4990 ENERGY WAY RENO, NV 89520 RENO, NV 89502 **Current Mailing Address: New Mailing Address:** P.O. BOX 30008 4990 ENERGY WAY RENO, NV 89520 RENO, NV 89502 FEI Number: 47-0673087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND DRIVE PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WIELAND, ANDREAS Name: Name: VIA CRUSCH 8 CH7402 Address: Address: City-St-Zip: BONADUZ, SW City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: ROBERT, HAMILTON

Address:

City-St-Zip:

4990 ENERGY WAY RENO, NV 89502

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: ROBERT HAMILTON VP 04/28/2009