

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007495

FILED  
Mar 17, 2006  
Secretary of State

Entity Name: INTEGRATED FUELING TECHNOLOGIES, INC.

**Current Principal Place of Business:**

2110 DREW STREET, SUITE 200  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

2110 DREW STREET, SUITE 200  
CLEARWATER, FL 33765

**New Mailing Address:**

FEI Number: 75-3065130      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KAPLAN, KAREN  
2110 DREW STREET, SUITE 200  
CLEARWATER, FL 33765      US

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

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:**

Title: CP ( ) Delete  
Name: EZRA, MEIR  
Address: 2110 DREW STREET, SUITE 200  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: STAPLES, MIKE  
Address: 896 ISLAND WAY  
City-St-Zip: CLEARWATER, FL 33767

Title: S ( ) Delete  
Name: KAPLAN, KAREN  
Address: 2110 DREW STREET, SUITE 200  
City-St-Zip: CLEARWATER, FL 33765

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Change (X) Addition  
Name: DAVIS, JENNIFER  
Address: 2110 DREW STREET, SUITE 200  
City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN KAPLAN

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03/17/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date