

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 JUL 29 PM 3:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000028014**

1. Corporation Name

THE Hydrogen Corporation

2. Principal Office Address

16776 Bernardo Center Dr

Suite, Apt. #, etc.

203

City & State

San Diego Ca

Zip

92128

Country

USA

3. Mailing Office Address

SAME AS#2

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified
To Do Business in Florida

03/24/98

5. FEI Number

911853701

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Schwartz Gold Cohen Eschary, P.A.
Attn: Edward Cohen, Esq.

Street Address (P.O. Box Number is Not Acceptable)

54 S W Boca Raton Blvd.

Suite, Apt. #, Etc.

City

Boca Raton

State
FL

Zip Code

33432-4708

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Chair	N Munro Meuck	15022 Paseo Del Mar	Del Mar, Ca 92014
Dir.	Robert Parker	415 Chestnut Ave #C	Carlsbad Ca 92008
Dir.	AJ Glenn III	1505 Sunnybrook Farm Rd	Atlanta Ga 30350
Dir.	Charles Kallman	11944 Camino to Computer	San Diego, Ca 92128

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Charles Kallman-Director

25 July 02

858 485 0747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (9/01)



State of Florida
Office of State Treasurer
Tallahassee, Florida

FOR OFFICIAL USE	
DATE	NUMBER
06/24/2002	215581

DEBIT MEMORANDUM

To: DEPARTMENT OF STATE

General Revenue Total	0.00
Trust Total	6,116.25
Other Total	0.00
Total	\$6,116.25

ALL
4530

Distribution

Cross Ref	Samas Code	Reason	Amount
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	61.25
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	70.00
204	45-50-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	78.75
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	80.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	450.00
204	45-50-2-130001-45300100-00-000100-00	UNCOLLECTED FUNDS	558.75
204	45-50-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	900.00
204	45-50-2-130001-45300100-00-000100-00	OTHER	908.75
204	45-50-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	1,358.75

If there are any questions, contact Treasury Receipts Section at (850) 413-2772. **FF 6,116.25 / SF 4,337.82**
9010006738569--1
07/30/02--01006--002
******945.00 ****945.00**

The above named fund(s) has been reduced by the amount of this check(s) under the authority of Section 215.34, F.S.

Process Date: 06/13/2002

State Treasurer

RECEIVED
02 JUN 26 AM 9:20
BUREAU OF
MANAGEMENT AND
FINANCIAL SERVICES

